

**Prison Rape Elimination Act (PREA) Audit Report
Adult Prisons & Jails**

☐ Interim ☒ Final

Date of Report Feb 14, 2018

Auditor Information

Name: Charles E. Owens	Email: Charles.E.Owens@hawaii.gov
Company Name: Hawaii Department of Public Safety	
Mailing Address: 919 Ala Moana Blvd. Suite 116	City, State, Zip: Honolulu, Hawaii
Telephone: 808-266-9591	Date of Facility Visit: July 9-15, 2017

Agency Information

Name of Agency: California Department of Corrections and Rehabilitation	Governing Authority or Parent Agency (If Applicable): State of California		
Physical Address: 1515 "S" Street	City, State, Zip: Sacramento, California 95811		
Mailing Address: Department of Corrections and Rehabilitation, P. O. Box 942883,	City, State, Zip: Sacramento, CA 94283		
Telephone: 916-985-2561	Is Agency accredited by any organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
The Agency Is:	<input type="checkbox"/> Military	<input type="checkbox"/> Private for Profit	<input type="checkbox"/> Private not for Profit
<input type="checkbox"/> Municipal	<input type="checkbox"/> County	<input checked="" type="checkbox"/> State	<input type="checkbox"/> Federal

Agency mission: We enhance public safety through safe and secure incarceration of offenders, effective parole supervision, and rehabilitative strategies to successfully reintegrate offenders into our communities.

Agency Website with PREA Information: <http://www.cdcr.ca.gov/PREA>

Agency Chief Executive Officer

Name: Scott Kernan	Title: CDCR Secretary
Email: scott.kernan@cdcr.ca.gov	Telephone: 916 323-6001

Agency-Wide PREA Coordinator

Name: Shannon Stark	Title: Captain, PREA Coordinator
Email: Shannon.stark@cdcr.ca.gov	Telephone: 916-324-6688

PREA Coordinator Reports to: Amy Miller, Associate Director, Female Institutions		Number of Compliance Managers who report to the PREA Coordinator 36	
Facility Information			
Name of Facility: Richard J. Donovan Correctional Facility (RJD)			
Physical Address: 480 Alta Rd., San Diego, Ca. 92179			
Mailing Address (if different than above): Click or tap here to enter text.			
Telephone Number: (619) 661-7800			
The Facility Is:	<input type="checkbox"/> Military	<input type="checkbox"/> Private for profit	<input type="checkbox"/> Private not for profit
<input type="checkbox"/> Municipal	<input type="checkbox"/> County	<input checked="" type="checkbox"/> State	<input type="checkbox"/> Federal
Facility Type:	<input type="checkbox"/> Jail	<input checked="" type="checkbox"/> Prison	
Facility Mission: We enhance public safety through safe and secure incarceration of offenders, effective parole supervision, and rehabilitative strategies to successfully reintegrate offenders into our communities.			
Facility Website with PREA Information: http://www.cdcr.ca.gov/PREA			
Warden/Superintendent			
Name: Daniel Paramo Warden		Title: Warden	
Email: Daniel.Paramo@cdcr.ca.gov		Telephone: 619-661-7800	
Facility PREA Compliance Manager			
Name: Jorge Santana		Title: Associate Warden / PREA Compliance Manager	
Email: Jorge.Santana@cdcr.ca.gov		Telephone: (619) 661-7898	
If Facility Health Service Administrator			
Name: MaryAnn Glynn		Title: Chief Executive Officer	
Email: MaryAnnGlynn@CDCR.CA.GOV		Telephone: 619 661 8674	
Facility Characteristics			
Designated Facility Capacity: 4072		Current Population of Facility: 3809	
Number of inmates admitted to facility during the past 12 months			1700
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 30 days or more:			1962
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 72 hours or more:			2273
Number of inmates on date of audit who were admitted to facility prior to August 20, 2012:			367
Age Range of	Youthful Inmates Under 18: Click or tap	Adults: Click or tap here to enter text.	

Population:	here to enter text.			
Are youthful inmates housed separately from the adult population?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> NA	
Number of youthful inmates housed at this facility during the past 12 months:			0	
Average length of stay or time under supervision: if name chain union			0	
Facility security level/inmate custody levels:			Level 1-4	
Number of staff currently employed by the facility who may have contact with inmates:			2266	
Number of staff hired by the facility during the past 12 months who may have contact with inmates:			508	
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:			41	
Physical Plant				
Number of Buildings: 25		Number of Single Cell Housing Units: 0		
Number of Multiple Occupancy Cell Housing Units:		23		
Number of Open Bay/Dorm Housing Units:		2		
Number of Segregation Cells (Administrative and Disciplinary):		200		
Description of any video or electronic monitoring technology (including any relevant information about where cameras are placed, where the control room is, retention of video, etc.):				
Administrative Segregation, Mental Health, HU 6 & HU 7, Housing blocks A, B, C, E & D, Facility Visiting Rooms are all equipped with state of the art video Camera equipment.				
Medical				
Type of Medical Facility:		Click or tap here to enter text.		
Forensic sexual assault medical exams are conducted at:		Pomerado Hospital		
Other				
Number of volunteers and individual contractors, who may have contact with inmates, currently authorized to enter the facility:			700	
Number of investigators the agency currently employs to investigate allegations of sexual abuse:			14	

Audit Findings

Facility Characteristics



Richard J. Donovan Correctional Facility (RJD)

Main Phone: (619) 661-6500

480 Alta Road, San Diego, CA 92179

Visiting Hours

Saturdays, Sundays and Designated Holidays* from 8:00 a.m. to 3:00 p.m.

* *New Year's Day, Independence Day, Thanksgiving, Christmas*

To schedule an Administrative Segregation Unit or Non-Contact Appointment, please call (619) 661-7900.

Calls will be answered in the order in which they are received.

A CDCR funded Visitor Center is at the institution operated by a community-based organization under contract to CDCR. The Visitor Center provides visiting assistance to family members and friends including a sheltered place to wait before and after visits, transportation to and from local transit terminals, childcare, clothing appropriate for visits on loan, and information about local resources, visiting rules and regulations.

Local Inmate Family Councils (IFC's) are a gathering of family and friends of the incarcerated who meet regularly with Wardens to support visiting since keeping strong family connections with loved ones is a powerful rehabilitative tool. These IFC's promote visiting by clarifying rules and regulations as well as discussing health, education, vocational training, packages, books, and related issues. For more information on connecting with a local IFC, please visit the Statewide IFC website (<http://www.statewide-ifc.com>).

The primary mission of the Richard J. Donovan Correctional Facility (RJD) is to provide housing and supervision for inmates classified as minimum - high custody, encompassing a Minimum Support Facility; one (1) Level II, non-designated Programing Facility; one (1) Level III, General Population facility, one (1) Level

IV, Sensitive Needs Yard (SNY) facility, and two (2) Level III, SNY facilities. Designed as a training and work-oriented facility, RJD provides vocational, academic, and industrial programs.

The Institutional Hearing Program (IHP) at RJD is designed to prepare inmates, who are illegal immigrants, for release to the United States Department of Homeland Security's custody and return to their country of origin. Self-Help and Inmate Leisure Time Activity Groups include Narcotics Anonymous,

Institutional Juvenile Diversion Programs include Convicts Reaching Out to People (CROP). Inmates participate in face-to-face discussions with juveniles explaining the downfalls of drug use, gang life, and criminal thinking, while advising on how to avoid life in prison. Rehabilitative inmate leisure activities include social, educational, recreational, and mentoring groups. RJD offers study in the areas of Recycling and Green Industries; Food Handling; Coastline College; Creative Writing; and the highly acclaimed Thinking for a Change. Inmates may also participate in a Veteran's Group and other volunteer-led community service activities. Academic opportunities include Literacy and Adult Basic Education through GED. Vocational opportunities include the Machine Shop, Welding, and HVAC (Heating, ventilation, and air conditioning).

CDCR - RJD Religious services are provided for inmates of all denominations. RJD employs a Catholic Priest, a Protestant Chaplain, a Muslim Imam, a Native American Spiritual Leader, and a Jewish Rabbi. Additionally, nearly (430) volunteers provide religious and other programs such as KAIROS, Alternatives to Violence/Hands of Peace, the Urban Ministries Institute (TUMI), and many other faith-based programs. Additionally, California Prison Industries Authority (CALPIA) employs inmates at RJD in its laundry, bakery, and casual shoe factory.

The healthcare providers at RJD are aware that friends and family members have a special interest in the health and wellbeing of their loved ones. However, information can only be shared with those individuals that the patient has given authorization to receive. Please advise the patient to obtain an Authorization for Release of Protected Health Information form (CDCR-7385) from a healthcare provider. Once completed and on file, information can be shared with you. Once approved, you may call 619-661-6500, extension 7088, and a representative will return your call within five business days.

RJD was named for the late Assemblyman and Judge Richard J. Donovan, who sponsored legislation to build a State Correctional Facility in the San Diego area. However, the Honorable Donovan passed away before the institution was built.

Daniel Paramo has been Warden at Richard J. Donovan Correctional Facility since 2011. Paramo was Chief Deputy Warden from 2008 to 2011 and Associate Warden from 2005 to 2008 at Centinela State Prison. He served in multiple positions at Calipatria State Prison from 1991 to 2005, including Facility Captain, Classification and Parole Representative, Correctional Counselor and Community Resource Manager

Summary of Audit Findings



A PREA Audit was coordinated by Hawaii Department of Public Safety (HIDOC) and California Department of Corrections & Rehabilitation (CDCR) for Richard J. Donovan Correctional Facility (RJD). The audit was conducted by HIDOC on July 09-15, 2017 by Hawaii Certified PREA Auditor Charles E. Owens (WCCC Chief Investigator) with 3 support staff; Feliua Leota, (Department Training SME Instructor & inmate investigations SGT), Layton Kaleikau, (Facility Housing Supervisor & inmate investigations SGT) and Tiresa Harris, (Facility Maintenance Supervisor & inmate investigations SGT) Six weeks prior to the on-site audit, the pre-audit questionnaire and documents were provided for reviewed. Four weeks prior to audit coordination and follow up review of information was completed with department PREA coordinators.

Two weeks prior to audit phone interviews were conducted with State KEY staff.

State PREA support staff for this audit;
Shannon Stark CDCR PREA Coordinator
Daniel Paramo (Warden/Superintendent)
Jorge Santana (RJD PREA Compliance Manager)

On July 09, 2017 a tour for the facility was conducted with the PREA compliance manager and with the facility support staff.

RJD is a [state prison](#) located in [unincorporated](#) southern [San Diego County, California](#), near [San Diego](#). It is a part of the [California Department of Corrections and Rehabilitation](#). It is a 780-acre (320 ha) facility. It is the only state prison in San Diego County. The prison is situated on a [mesa](#) about 1.5 miles (2.4 km) from the [Mexico–United States border](#),^[4] in the foothills of [Otay Mesa](#) overlooking the Mexican border. The Otay Mesa site is shared with four other properties related to law enforcement.

RJD has five interfaith chapels. Each religion represented at RJD gets a series of lockers to store materials.

The prison includes a bakery that serves the facility and five other CDCR facilities. Each day, it produces about 18,000 loaves. About 85 prisoners work in the bakery, as of 2010. During that year, the monthly salary of a prisoner working in the bakery was between \$90 (\$98.84 when adjusted for inflation) and \$100 (\$109.83 when adjusted for inflation). [KPBS](#)^[4] said that bakery jobs were "desirable" compared to clerk and custodial jobs, which pay a monthly salary between \$24 and \$48.

The prison also includes a shoe factory; it manufactures shoes used by prisoners throughout CDCR. It makes both high top and low top versions. About 2,000 shoes are produced every day. The monthly salary for an employee was between \$90 and \$100, so the shoe factory positions are prized in RJD.

The PREA coordinator has good coverage of PREA pamphlets and fliers in all dorms, living areas, and recreation rooms. Inmate living conditions appears to be very good and they respect staff and visitors. Staff is professional and provided a sense of a safe and secure environment. Local Police Department investigates criminal allegations of sexual abuse or sexual assault and internal appointed staff investigates administrative allegations.

PREA interviews were conducted on-site with the facility key supervisors, administration support staff, 45 officers and over 100 inmates. The facility has cutting edge technology support for line staff such as video coverage of common area, entrance or exit doors, dining area, and classrooms. Line staff logs all activities with electronic systems for documentation with appropriate access to an inmate inline file management. From talking with staff, when a PREA incident is reported it is kept strictly confidential. The staff member who takes the initial report speaks to no one other than the Watch Lieutenant. Reports are done immediately and submitted in person to the Watch Lieutenant. RJD does a great job with the amount of staff and resources as all the staff spoken to were well informed on the protocols in reporting PREA incidents. I was impressed to find the facility so well kept and clean. Both staff and custody have a vested interest in the facility and it was apparent by the cleanliness of this very large facility. Staff training was also impressive as most training was done by computer with the tracking of all training, recertification and in-service automatically logged and updated. The uses of so much current technology to provide security and improve custody's conditions was impressive.

The auditor was provided with extensive and lengthy digital files of documentation prior to the audit, in an effort to support a conclusion of RJD's compliance with the DOJ PREA standards. When the on-site PREA audit was completed, an "out-brief" meeting was held with the key staff attending. No final rating was given at that time. During the course of the on-site visit, staff were found to be courteous, cooperative, and professional. All areas of the facilities toured were found clean and well maintained. The overall audit process was discussed and one corrective action or concern was pointed out. At the conclusion of the out briefing the auditor thanked the staff for their hard work and commitment to the Prison Rape Elimination Act.

The following 3 areas the Auditor was very impress with RJD and will be recommending as Exceeded the standards.

115.13 SUPERVISION AND MONITORING

RJD staff are very professional and aware of their environment and surroundings. They are actively monitoring staff, subordinates and inmates via video feeds and boots on the ground. Because of this positive atmosphere and the lead from the front attitude I see RJD as exceeding this standard.

115.31 TRAINING

CDCR has some of the best ongoing training for staff that I have ever seen. It was impressive to see most or all training done at the facility completed in a timely manner by computers and In-Service-Training. This allowed administration to track recertification and in-service that is automatically logged and updated. The use of so much current technology to provide security and improve custody's conditions is stunning. Because of this higher level of educating the staff, tracking compliance and keeping staff informed with the latest updates, I see RJD as exceeding this standard.

115.34 SPECIALIZED TRAINING: INVESTIGATIONS

RJD PREA investigator training is updated every year. Every year Corrections Supervisors must complete online PREA training as well as the specialized PREA Investigations training for PREA in order to be qualified to conduct investigations. The training included techniques for interviewing sexual abuse victims, proper use of Miranda and Garrett warnings, sexual abuse evidence collections in a confinement setting, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. Because of this higher level of educating the supervisors and investigation staff with the latest updates, I see RJD as exceeding this standard.

Number of Standards Exceeded: 3

Number of Standards Met: 43

Number of Standards Not Met: 0

Summary of Corrective Action (if any)

Summary of Corrective Actions (if any)

115.41 Screening for risk of victimization and abusiveness

1. The intake screening process is inconsistent.
2. Review of records shows screening tools were not always filled out properly.
3. Several screening forms were missing.

Screening for risk of victimization and abusiveness: The Interim Report identified corrective action as CDCR was developing an objective screening instrument, based on new directives RJD was utilize an objective screening instrument and developing training and implement of an objective screen instrument. This standard impacted several other screening relevant standards such as 115.42 and 115.81.

CDCR was completing final instructions and implementing updates prior to audit. Standard 115.42, Use of screening information: The department identified corrective action to develop an objective screening instrument, RJD was utilizing an objective screening instrument, development training and was implementing of an objective screen instrument to track requirements.

The full 180-day corrective action period was utilized to achieve the necessary and agreed upon action to warrant a Meets Standard rating. The specific details related to the corrective action is in the narrative section and in the discussion of the relevant PREA Standards.

After the physical audit, Sept 20, 2017 Mr. Santana provided the Departments new P&Ps appropriately addressing the **115.41** PREA Screening tools. RJD ensured that In-Service-Training (IST) department at RJD trained all Custody Supervisors that may potentially screen new inmate arrivals (Sergeants and Lieutenants) regardless of regular assignment in the PREA Screening Process.

All Sergeants and Lieutenants that my potentially be in Receiving and Release when an inmate arrives has the knowledge and training to properly screen an inmate for PREA and appropriate housing. All new inmate arrivals are listed on the intake sheets. The PREA Compliance Manager routinely monitors the process by reviewing a sample of new arrivals from the intake sheet to ensure custody supervisors are completing the PREA Screening and intake appropriately in Strategic Offender Management System (SOMS) and Electronic Records Management System (ERMS).

PREVENTION PLANNING

Standard 115.11: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

115.11 (a)

- Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment? ☒ Yes ☐ No

115.11 (b)

- Has the agency employed or designated an agency-wide PREA Coordinator? ☒ Yes ☐ No
- Is the PREA Coordinator position in the upper-level of the agency hierarchy? ☒ Yes ☐ No
- Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities? ☒ Yes ☐ No

115.11 (c)

- If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.) ☒ Yes ☐ No ☐ NA
- Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.1, Prison Rape Elimination Act (PREA) outlines the Agency's zero tolerance policy regarding sexual abuse, sexual harassment and retaliation. The Agency has an upper level, Agency Statewide PREA Coordinator who states they have sufficient time, and authority to develop, implement, and oversee

agency efforts to comply with the PREA standards in all of its facilities. The organization chart has the position identified as a Correctional Manager/PREA, and reports to the Assistant Secretary of Prisons Division. CDCR has identified a PREA Compliance Manager with sufficient time and authority to coordinate, develop, implement, and oversee the agency's efforts to comply with the PREA standards at the Facility level. While conducting interviews of staff and offenders, all were aware of the agency's zero tolerance policy. Tour of the facility, the auditor observed posted information throughout the facility regarding the agency's zero tolerance policy regarding sexual abuse, sexual harassment and retaliation.

Standard 115.12: Contracting with other entities for the confinement of inmates

115.12 (a)

- If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.) ☒ Yes ☐ No ☐ NA

115.12 (b)

- Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates OR the response to 115.12(a)-1 is "NO".) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.2 PREA policies, The CDCR has included PREA language into the agency's PREA policy regarding contracts which would meet the requirements of this standard, if the institution were to contract for the confinement of inmates. Language states that any new or renewed contracts for the confinement of offenders will include the requirement that the contracted facility comply with federal PREA standards and allow them to monitor PREA compliance. It also states the department will not enter into contracts with facilities that fail to comply with PREA standards, except in emergent situation. They can conduct audits of all entity's that are contracted for the confinement of inmates to ensure compliance with Federal PREA standards.

All confinement contracts are reviewed and updated annually. All contract language provided indicated that all contracts with agencies or other entities included language of the entity's obligation to adopt and comply with the PREA standards, and they monitor to ensure that the contractor is complying with the PREA standards. An interview with the contract administrator demonstrated they were aware of this requirement and it is in practice. The facility has not entered into any contracts for the confinement of inmates; therefore, this standard does not apply.

Standard 115.13: Supervision and monitoring

115.13 (a)

- Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?
☒ Yes ☐ No
- Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?
☒ Yes ☐ No
- Does the agency ensure that each facility's staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No
- Does the agency ensure that each facility's staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring?
☒ Yes ☐ No
- Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No
- Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No
- Does the agency ensure that each facility's staffing plan takes into consideration all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No
- Does the agency ensure that each facility's staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No

- Does the agency ensure that each facility's staffing plan takes into consideration the number and placement of supervisory staff in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No
- Does the agency ensure that each facility's staffing plan takes into consideration the institution programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No ☐ NA
- Does the agency ensure that each facility's staffing plan takes into consideration any applicable State or local laws, regulations, or standards in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No
- Does the agency ensure that each facility's staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No
- Does the agency ensure that each facility's staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring?
☒ Yes ☐ No

115.13 (b)

- In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.) ☒ Yes ☐ No ☐ NA

115.13 (c)

- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section? ☒ Yes ☐ No
- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies? ☒ Yes ☐ No
- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan? ☒ Yes ☐ No

115.13 (d)

- Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment? ☒ Yes ☐ No
- Is this policy and practice implemented for night shifts as well as day shifts? ☒ Yes ☐ No
- Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☒ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☐ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.4 PREA policies, address this standard. RJD has demonstrated compliance with all elements of this standard. While touring the facility, the auditor observed unannounced rounds being conducted throughout the facility. During interviews of staff, they acknowledge that supervisory staff conducts unannounced rounds on a regular basis. A review of logs verified that these rounds occur and are being documented. CDCR has developed, documented and made its “best efforts” to comply on a regular basis with a staffing plan that provides for adequate staffing levels, video monitoring, and considers the factors identified in section (a) as identified as items 1-11. The RJD staffing plan was reviewed and complied with the requirements of

(a). It was recommended to include budgetary information and prior request for additional items to establish that RJD is conscientious of its needs while balancing higher objective of the Executive and Legislative Branches of government.

(b) According to inter-office memorandum dated October 15, 2016, the PREA Coordinator and PREA CM, RJD captures any deviation from the staffing plan through the Telestaff Program and Daily Activities Report. The Watch Commander is responsible for reporting and justifying all deviations from the approved staffing plan.

(c) DOM section 54040.17.1 states that, whenever necessary, but no less frequently than once each year, in consultation with the PREA Coordinator, the PREA CM and the Program Support Unit shall assess, determine, and document whether adjustments are needed to: (1) The staffing plan; (2) The facility’s deployment of video monitoring systems and other monitoring technologies; and (3) The resources assigned to ensure adherence to the staffing plan.

Based on a review of the staffing plan and interviews with the Warden, PREA Coordinator and PREA CM the evidence indicates that RJD is compliant with this standard. The PREA Coordinator is responsible for monitoring all state prison compliance with this DOM.

(d) DOM section 54040.4 addresses security rounds; A custody supervisor assigned to each facility or unit shall conduct weekly unscheduled security checks to identify and deter sexual violence, staff sexual misconduct and sexual harassment of any kind. These security checks shall be documented in the Unit Log Book in red pen. The Log Book shall indicate the date, time and location the security check was conducted. Based on interviews with random staff, supervisors and reviews of the unit log books, it is evident that unannounced supervisor rounds are logged and occurring on all watches in excess of the weekly mandates in all units at RJD.

Standard 115.14: Youthful inmates

115.14 (a)

- Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☐ Yes ☐ No ☒ NA

115.14 (b)

- In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☐ Yes ☐ No ☒ NA
- In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☐ Yes ☐ No ☒ NA

115.14 (c)

- Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☐ Yes ☐ No ☒ NA
- Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☐ Yes ☐ No ☒ NA
- Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☐ Yes ☐ No ☒ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Based on the documentation provided and staff interviews, RJD is an adult facility and does not house youthful inmates under the age of 18. Therefore, this standard does not apply.

Standard 115.15: Limits to cross-gender viewing and searches

115.15 (a)

- Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners? ☒ Yes ☐ No

115.15 (b)

- Does the facility always refrain from conducting cross-gender pat-down searches of female inmates in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before August 20, 2017.) ☐ Yes ☐ No ☒ NA
- Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A here for facilities with less than 50 inmates before August 20, 2017.) ☐ Yes ☐ No ☒ NA

115.15 (c)

- Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches? ☒ Yes ☐ No
- Does the facility document all cross-gender pat-down searches of female inmates? ☒ Yes ☐ No

115.15 (d)

- Does the facility implement a policy and practice that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? ☒ Yes ☐ No
- Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit? ☒ Yes ☐ No

115.15 (e)

- Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status? ☒ Yes ☐ No
- If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner? ☒ Yes ☐ No

115.15 (f)

- Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? ☒ Yes ☐ No
- Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.4, 54040.5 & 52050.16.6 address this standard where RJD demonstrated compliance with all elements of this standard. Policy 54040.5 requires staff of the opposite gender to announce their presence when entering housing areas. The auditor observed staff announcing themselves prior to entering a housing area

The CDCR Department Organization Manual (DOM) regarding cross-gender strip searches and cross-gender visual body cavity searches specifically states that correctional personnel, other than qualified medical staff, shall not conduct unclothed body inspections or searches of an inmate of the opposite sex, except in an emergency. The policy also states that staff of the opposite biological sex shall not complete routine unclothed body searches. Policy 54040.5 requires the documentation of all cross-gender strip searches and cross-gender visual body cavity searches in accordance with DOM section 52050.16.5. All random staff interviews indicate they completed the required training and knew the appropriate method of conducting cross-gender and transgender searches if needed.

Policy 54040.4, Preventative Measures, requires the institution to enable inmates to shower, perform body functions, and change clothing without non-medical staff of the opposite sex viewing their buttocks or genitalia except in exigent circumstances or when such viewing is incidental to routine cell checks. In order to minimize exposure, staff of the opposite sex announce their presence upon entering the unit. During the tour, the auditors observed every shower, toilet, dressing area, and prisoner strip search area within the institution. The auditors found no areas of concern regarding cross gender viewing. Each area has either permanently installed modesty screens or frost on the windows in order to provide sufficient privacy while maintaining security. Several random interviews were conducted with both staff and inmates and it was very evident that sufficient privacy was given to the inmates while showering, performing bodily functions, changing and/or performing strip searches.

Via observation, it is evident that female staff are announcing their presence upon entry into the housing units.

Policy, 52050.16.6, Unclothed and Clothed Body Searches of Transgender or Intersex Inmates, indicates that in the event that an inmate going through Receiving and Release who self-identifies as transgender or self-identifies as a gender which seems not to match their biological sex, the search will be conducted by staff of the same biological sex. If staff is unable to determine the genital status through medical records or an interview with the inmate, then medical staff will conduct a standard medical examination.

(a)) CDCR Department Operations Manual (DOM) section 52050.16.3 applies to Clothed Body Search of Male Inmates, section 52050.16.4 applies to Clothed Body Search of Female Inmates, and section 52050.16.5 applies to Unclothed Body Search of Inmates. No Correctional personnel, other than qualified medical staff, shall conduct unclothed body inspections or searches of an inmate of the opposite sex, except in an emergency. DOM section 52050.16.7 applies to Unclothed and Clothed Body Searches of Transgender and Intersex Inmates. Based on written policy, training information, and interviews with staff and inmate-patients, RJD is compliant this standard and no violations were observed during the onsite audit. RJD as a medical type of facility with specific units licensed and accredited as a male inmate-patient health care facility has a significant amount of staff classified as medical or mental health professionals, which are not subject to this restriction.

(b) DOM section 52050.16.4 states that clothed body searches of female inmates shall be conducted by female correctional staff only, except in emergency situations and under no circumstances shall male correctional staff perform non-emergency clothed body searches of female inmates. RJD is a male facility and this Standard is not applicable.

(c) DOM section 54040.5 states, Institutions shall document all cross-gender strip searches and cross-gender visual body cavity searches in accordance with DOM section 52050.16.5, and shall document all cross-gender pat-down searches of female inmates in accordance with DOM section 52050.16.4 utilizing the Notice of

Unusual Occurrence (NOU) form. Completed NOU forms shall be reviewed by the supervisor and routed to the institutional PREA CM to retain for audit purposes. If the search is incidental to an emergency or crime, a CDCR Form 837, Crime Incident Report, shall be utilized to document the incident.

RJD did not process a NOU form as there were no incidents of cross-gender strip searches or visual body cavity searches, during the twelve-month record period. RJD is a male facility and the section related to female inmates is not applicable.

(d) DOM section 54040.4, Preventative Measures states each institution shall enable offenders to shower, perform bodily functions, and change clothing without non-medical staff of the opposite biological sex viewing their breast, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Except in circumstances where there would be an impact to safety and security, modesty screens shall be placed strategically in areas that prevent incidental viewing. In order to minimize cross gender exposure, staff of the opposite biological sex shall announce their presence when entering the housing unit. This announcement is required at the beginning of each shift and/or when the status quo within the housing unit changes. The portion of (d) related to the privacy from opposite gender viewing when showering, performing bodily functions and changing clothes is compliant with the standards and as evidenced by a physical inspection of housing units, interviews with inmate-patients and interviews with staff. There were two areas that required minor remedial adjustment. The first was a housing unit shower window and the second a warehouse restroom that required an "in use" sign. RJD staff corrected both items onsite and provided photo verification. The announcement portion required corrective action in the form of a reminder posting to offenders and staff. The reminder reiterated that the announcement is necessary in the housing unit to ensure that the inmate-patients are fully cognizant of the terminology of "female on the floor" or "staff on the floor." The inmate-patient interviews highlighted a concern with hearing the announcement in a therapeutic type of room setting. The rooms are designed more for a hospital setting, than a prison environment. If you combine this with a medicated or incapacitated population of inmate-patients, who have medical and mental health concerns these reminders are key to notice. The inmate-patient interviews indicated that the announcements were inconsistently being made at the point of entry, but they did hear an announcement at the change of watch. They did not understand the purpose of the change of watch announcement as they did not read their handbook. RJD staff noted that in a majority of the housing units female staff is predominant either as security staff, health care staff, or mental health staff. Therefore, a change in the "status quo" is rare. Non-staff entries into a unit should also trigger the announcement to alert inmate-patients to other individuals outside of the norm, who may be present. RJD through reminders and posting of the Handbook notification achieved compliance.

(e) DOM section 52050.16.7 states, if there is an individual going through Receiving and Release (Intake), who self-identifies as transgender or with a gender that seems not to match their biological sex, the search will be conducted by staff of the same biological sex as the inmate to be searched. If an individual's genital status is ambiguous, the search shall be conducted by a staff member that is the same biological sex as indicated in the inmate's records. If staff are unable to determine the genital status through medical records or an interview with the inmate, the inmate shall be placed on single-cell status or in administrative segregation for his/her safety, until the standard intake medical evaluation is completed. This standard medical examination will establish the genital status of the inmate.

Compliance with this standard was verified through staff interviews and interviews with transgender inmate-patients. The transgender inmate-patients indicated that this type of search did not occur at any of the CDCR facilities and expressed that RJD staff treated them respectfully and professionally.

(f) DOM sections 52050.16.4, Clothed Body Search of Female Inmates and Section 52050.16.7, Unclothed and Clothed Body Searches of Transgender or Intersex Inmates addresses this standard. CDCR Office of Training

and Professional Development, Searches of Inmates and Property, Instructors Guide (OTPD, 4/2015) provides a step by step training on how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates. Section 54040.4 states, Employees shall also be trained in how to conduct cross-gender pat-down searches, transgender pat-down searches, and unclothed body cavity searches. When conducting these types of searches, employees shall ensure that these searches are conducted in a professional, respectful manner, and in the least intrusive manner possible consistent with security needs. Searches shall be conducted in accordance with policy, procedure and training as per California Code of Regulations (CCR), Title 15, Section 3287(b).

Based on interviews with staff, random inmate-patients and transgender inmate-patients, it is evident that staff have been trained to ensure that pat down searches are conducted in a professional and respectful manner. The PAQ indicated that 100% of security staff were trained and a sampling of the training records were reviewed.

Standard 115.16: Inmates with disabilities and inmates who are limited English proficient

115.16 (a)

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing? ☒ Yes ☐ No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision? ☒ Yes ☐ No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities? ☒ Yes ☐ No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities? ☒ Yes ☐ No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities? ☒ Yes ☐ No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes)? ☒ Yes ☐ No

- Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing? ☒ Yes ☐ No
- Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? ☒ Yes ☐ No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities? ☒ Yes ☐ No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills? ☒ Yes ☐ No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Are blind or have low vision? ☒ Yes ☐ No

115.16 (b)

- Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient? ☒ Yes ☐ No
- Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? ☒ Yes ☐ No

115.16 (c)

- Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.7 policies address this standard where RJD demonstrated compliance with all elements of this standard. They have taken significant steps to ensure that any offender regardless of physical limitation or language barrier all inmate have equal access, opportunity and ability to benefit from the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. PREA signs and bulletin boards in prominent areas throughout the facility that include information in both English and Spanish. Pamphlets are also available for Spanish and/or low functioning offenders. Interpreter services are also available for both deaf and limited English proficient offenders.

Detection, Notification and Reporting, states that the department shall not rely on offender interpreters, offender readers, or other types of offender assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the offender's safety, the performance of first-response duties, or the investigation of the offender's allegations. In addition, Title 15 and ADA requirements require assistance to offenders whose TABE score is 4.0 or lower, and policy 54040.12, requires that except in limited or exigent circumstances, investigators shall not rely solely on inmate interpreters, readers or other types of inmate assistance. Through random staff and inmate interviews, it was found that staff and inmates understand that inmates with disabilities or language barriers have equal opportunity and will receive assistance when necessary for reporting purposes.

June 15, 2009 memorandum reminds CDCR staff of procedures to ensure effective communication with Limited English Proficient (LEP) inmates and created the LEP Coordinator, as the person to manage the process and use of the "I Speak" cards that are located in the control booth or officer's station

(a to (c) CCR Title 15, Section 3000 defines effective communication as providing the inmate, to the extent possible, the means to understand and participate in disciplinary process to the best of their ability. This may be accomplished through reasonable accommodation or assignment of a staff assistant. If the inmate's Test of Adult Basic Education (TABE) score is 4.0 or lower, employees are required to query the inmate to determine whether or not assistance is needed to achieve effective communication. The employee is required to document on CDCR forms his/her determination of whether the inmate appeared to understand the basis for that determination and how it was made. In due process proceedings, employees shall give priority to the inmate's primary means of communication, which may include but is not limited to; auxiliary communication aids, sign language interpreter, and bilingual interpreter. CDCR has a contract with Life Sign (7/1/14 to 6/30/17) to provide ASL Interpreter Services at state prisons. CDCR has a contract with Interpreters Unlimited through June 2017 to provide interpreter services over the telephone for 140 languages. CDCR indicated these contracts will be renewed. In a memorandum dated June 15, 2009, CDCR reminds staff of procedures to ensure effective communication with LEP inmates and identifies a LEP Coordinator as person to manage the process and the use of "I Speak" cards that are located at the facility. CDCR memorandum dated October 4, 2010, reiterates compliance with the ADA and access to ASL services, especially for due process scenarios.

CDCR Operation Manual Section 54040.12 states that except in limited circumstances or exigent circumstances, investigators shall not rely solely on inmate interpreters, readers, or other types of inmate assistance during a sexual violence, staff sexual misconduct, or sexual harassment investigations. The PAQ indicated that RJD did not utilize inmate interpreters during the twelve-month reporting period. There were several LEP/English as a Second Language (ESL) inmate-patients interviewed and two of the staff approved interpreters was an escort for the Audit Team. This escort assisted the Audit Team with interviewing

inmates where inmates could respond to interview questions. PREA posters and handouts are produced in English and Spanish. RJD staff indicated that for other languages they would rely on contracted services.

Standard 115.17: Hiring and promotion decisions

115.17 (a)

- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? ☒ Yes ☐ No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? ☒ Yes ☐ No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? ☒ Yes ☐ No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? ☒ Yes ☐ No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? ☒ Yes ☐ No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? ☒ Yes ☐ No

115.17 (b)

- Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates? ☒ Yes ☐ No

115.17 (c)

- Before hiring new employees, who may have contact with inmates, does the agency: perform a criminal background records check? ☒ Yes ☐ No

- Before hiring new employees, who may have contact with inmates, does the agency: consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse? ☒ Yes ☐ No

115.17 (d)

- Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates? ☒ Yes ☐ No

115.17 (e)

- Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees? ☒ Yes ☐ No

115.17 (f)

- Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions? ☒ Yes ☐ No
- Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees? ☒ Yes ☐ No
- Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? ☒ Yes ☐ No

115.17 (g)

- Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination? ☒ Yes ☐ No

115.17 (h)

- Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such

employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 31060.3 Policy, Recruitment, Selection and Promotion outlines that a criminal background check will be completed for all promotional candidates and external candidates in the hiring process. RJD has demonstrated compliance with all elements of this standard. Documentation was provided demonstrating that staff, contractors and volunteers received a background check prior to having contact with inmates. Per Policy Human Resources will review promotional candidates and former department employees on the Offender Management Network and the PREA database for information regarding substantiated allegations of sexual misconduct or any resignation pending investigation of alleged sexual misconduct and provide the review results to the Appointing Authority. The HR staff member confirmed that all employees have an affirmative duty to immediately disclose PREA related misconduct through their chain of command and material omissions or materially false information shall be grounds for termination. All new employees, contract staff and volunteers are required to complete a sexual misconduct disclosure form that asks about prior sexual misconduct/harassment

CDCR DOM section 31060.3 addresses 115.17(a/b) by prohibiting the hiring and promoting of anyone, or utilizing the services of any contractor or volunteer, who: 1) Has engaged in sexual violence, or staff sexual misconduct of an inmate in a prison jail, lockup, community confinement facility, juvenile facility, or other institution; 2) Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; 3) Has been civilly or administratively adjudicated to have engaged in the activity described above; 4) Implement and enforce departmental Equal Employment Opportunity (EEO) policy, and 5) Maintain the highest standards of personnel selection. CDCR Supplemental Application for all CDCR Employees (Form 1951, July 2016) must be completed for any applicant, transfers, and promotional opportunities.

This process was verified during HR interviews and file reviews with HR staff from both CDCR and RJD. The Auditor obtained samples from both entities for staff, contractors and volunteers. The form 1951 was amended in July 2016 to ensure full compliance with this standard.

(c) 1-2, DOM section 31060.16 states that a criminal records check is a requirement for employment with the Department. The process for checks involved using CI&I SSCH, LiveScan finger printing alert system, US INS Form I-9, Physical examination report and CDCR Form 1951, Supplemental Application for all CDCR employees. This process is used for internal and external applicants.

The LiveScan system allows CDCR HR to be alerted 24/7 on relevant background information for staff, contractors, and volunteers. HR staff confirmed utilizing various methods for screening based on the unique population being serviced (inmate-patients).

(d) CDCR Bid/Agreement states “Security Clearance/Fingerprinting” as one of the special terms and conditions. The State reserves the right to conduct fingerprinting and/or security clearance through the Department of Justice, Bureau of Criminal Identification and Information (BCII), prior to award and at any time during the term of the Agreement, in order to permit Contractor and/or Contractor’s employee access to State premises. The State further reserves the right to terminate the Agreement should a threat to security be determined. It stipulates that the contractor shall conduct a criminal background records check for each contract employee, who will have contact with CDCR inmates and provide a written certification that it was done. Contract employees, who have contact with inmates, shall be provided training to learn their responsibilities under the agency’s sexual abuse and harassment prevention, detection, and response policies and procedures (Exhibit D). This process was verified during HR interviews and file reviews with HR staff. Samples from both entities were obtained for staff, contractors and volunteers.

(e)) California Code of Regulations (CCR), Title 15, section 3411 states, if an employee is arrested or convicted of any violations of law; the employee must promptly notify the institution head or appropriate Director/Assistant Secretary of that fact. RJD memorandum dated November 21, 2016, reiterates this requirement to staff. CDCR memorandum dated February 26, 2016, Personnel Identification Card Issuance states the procedure for issuance of identification cards. The pre-employment procedures found in DOM 31060.16 apply to all employees, contractor or volunteer.

(f)) to (h) CDCR form 1951, Supplemental Application, requires a background check and PREA misconduct questions for all CDCR employees. CDCR/RJD also uses information from the California Law Enforcement Telecommunications System (CLETS) to access confidential criminal records through the Department of Motor Vehicles or other criminal justice information.

Title 15, section 3401.5 describes employee sexual misconduct and penalties, that all allegations of sexual misconduct shall be subject to investigation, which may lead to disciplinary action and/or criminal prosecution. CDCR 1951 form requires a certification acknowledgement that “the information provided contains no misrepresentations, omissions or falsification and the answers are true and correct. I understand and agree that if any material facts are discovered which differ from those facts stated by me on my application, during my interview, or at any time prior to employment with CDCR, I may not be offered the job. Furthermore, I understand and agree that if material facts are later discovered which are inconsistent with or differ from the facts I furnished before beginning employment, I may be disciplined, up to and including dismissal from State service.”

There is a method and process in place to notify internal and external facilities of a reported PREA incident. RJD Warden would notify the appropriate entity with departmental copies to the PREA Coordinator and relevant RJD staff. The CDCR’s commitment to paying for the LiveScan’s 24/7 notification of all criminal incidents exceeds the time mandates of this standard and verifies CDCR’s commitment to the goals and objectives of the PREA Standards. On November 21, 2016, RJD staff were reminded about the requirement to report negative police contact/arrest or off-duty misconduct to the Watch Commander.

Standard 115.18: Upgrades to facilities and technologies

115.18 (a)

- If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.) ☒ Yes ☐ No ☐ NA

115.18 (b)

- If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR has addressed this where RJD demonstrated compliance with all elements of this standard. RJD is considered a new facility with major improvements. RJD has implemented within its Design Criteria Guidelines the following language: "When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, consider and address how such technology may enhance the agency's ability to protect inmates from sexual abuse." During the facility tour, the auditors observed numerous completed construction expansion projects. There is a large video network system with approximately 200 cameras within the institution that administrators, supervisors and investigators have access to. This camera system records over 90% of the new facility and has an archive data base. The facility design did not appear to have any areas which would cause concern for inmate safety and staff presence was more than sufficient throughout the facility. The facility also had numerous corner mirrors to allow staff visual observation of blind spots in various areas of the facility. However, auditor did make a recommendation of installing VCC cameras in key CI security areas that are not directly monitored by security staff. Management will evaluate priority areas as new equipment is made available

CDCR procedures mandate the involvement of the PREA Coordinator when installing or updating a video monitoring system, electronic surveillance system or other monitoring technology. During interviews with the PREA Coordinator, it was verified that she is a part of the team for any upgrades to state prisons.

RESPONSIVE PLANNING

Standard 115.21: Evidence protocol and forensic medical examinations

115.21 (a)

- If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) ☒ Yes ☐ No ☐ NA

115.21 (b)

- Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) ☒ Yes ☐ No ☐ NA
- Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) ☒ Yes ☐ No ☐ NA

115.21 (c)

- Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiary or medically appropriate? ☒ Yes ☐ No
- Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? ☒ Yes ☐ No
- If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)? ☒ Yes ☐ No
- Has the agency documented its efforts to provide SAFEs or SANEs? ☒ Yes ☐ No

115.21 (d)

- Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?
☒ Yes ☐ No
- If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? ☒ Yes ☐ No
- Has the agency documented its efforts to secure services from rape crisis centers? ☒ Yes ☐ No

115.21 (e)

- As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews? ☒ Yes ☐ No
- As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals? ☒ Yes ☐ No

115.21 (f)

- If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.) ☒ Yes ☐ No ☐ NA

115.21 (g)

- Auditor is not required to audit this provision.

115.21 (h)

- If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? [N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.21(d) above.]
☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.9 policies address this standard where RJD demonstrated compliance with all elements of this standard. All staff interviewed could describe what actions would be taken to protect evidence for investigators. Regarding investigations of sexual abuse allegations, Staff are required to participate in a specialized training program which is based upon POST Guidelines on Adult/Adolescent Sexual Assault Investigations, PREA Resource Center, National Council on Crime and Delinquency, US Department of Justice and a National Protocol for Sexual Assault, Medical Forensic Examinations. This training is in response to this standard and California Penal Code 13516. Policy 54040.9, Forensic Medical Examinations, require the victim be taken to the designated outside hospital where contract staff conduct forensic exams. A telephone interview with contracted staff responsible for conducting said exams verified staff are appropriately trained in accordance with California State Law to conduct forensic exams.

RJD also has an agreement with the Office of Crime Victims Advocacy (OCVA) to field calls from offenders for advocacy services. OCVA staff will screen the call and transfer the caller to a geographically appropriate victim advocacy organization. A contract with OCVA indicates that OCVA will provide services to survivors of sexual abuse by ensuring response to the hospital during a SANE exam, presence during all investigatory interviews and legal proceedings and will provide emotional support, crises intervention, information and referrals. Staff has been trained in evidence collection and preservation to maximize the potential of collecting usable evidence, which they were able to articulate during interviews onsite. During tours of the facility posters for OCVA were in living units and other areas and inmates were aware of this service.

Policy states the victim has the right to have a victim advocate from a local rape crisis center at the examination. A Memorandum of Understanding has been implemented in the past with advocacy groups and is currently being updated and reviewed. The Victim Advocacy Group information was posted throughout the institution and available to inmates. In addition, interviews with random inmates supported the information has been posted and the inmates have knowledge of the type of help they can receive from the group.

(a) to (b) RJD utilizes Locally Designated Investigators (LDI) and other designated institutional staff who have been trained to conduct criminal and administrative investigations into allegations of sexual violence and/or staff misconduct. The investigative office at RJD is called the Investigative Services Unit (ISU). RJD PREA Garrity type of investigations against staff are managed at the department level by the Office of Internal Affairs (OIA). According to DOM, chapter 5, page 474 and 475, Crime Scene Preservation, Evidence and section 54040.9 Forensic Medical Examination, the designated supervisor and investigators follow a uniform evidence protocol and procedure when conducting sexual abuse investigations. The process addresses assault examinations appropriate for adult/adolescent and child/adolescent.

(c) to (e) According to CDCR Health Care Services Policy, Chapter 10 and RJD-Supplemental DOM, Article 44, section 54040.1, all inmates are offered treatment services relating to sexual abuse or assault to include forensic medical examinations without financial cost to the victim. DOM section 54040.09 mandates that the victim is taken to the designed outside hospital or onsite location, where Sexual Assault Response Team (SART) Contract Staff will complete the forensic exam. DOM 540540.8.1 states that all Deoxyribose Nucleic Acid (DNA) collection must comply with the State of California, Office of Emergency Services Reporting Instructions, which is a state-wide procedure. This section also includes the requirement for the Watch Commander to complete the Checklist to ensure that the Rape Crisis Center dispatches a victim advocate to the San Joaquin General Hospital (SJGH). The PAQ reflected 7 referrals to SJGH in the twelve-month reporting period. RJD PREA CM and medical staff confirmed that there is no time limitation, if there is any possibility that a forensic examination could yield viable forensic evidence. RJD does not contract for onsite Sexual Assault Nurse Examiner (SANE)/Sexual Assault Forensic Examiner (SAFE) examinations. RJD Facility Supplement to DOM 54040.1, RJD utilizes the SANE/SAFE services from SJGH. These exams are conducted by a SANE/SAFE staff employed by SJGH. DOM, section 54040.8.2 codifies the right for a PREA victim to have a victim advocate and/or support person for medical examinations and the investigatory interview. Victim advocates require training to provide emotional support, crisis intervention, and information about other applicable referrals. Auditor Owens did utilize the inmate phone system to facilitate a call Services for reporting or crisis. The respondent did verify that the services includes providing victim advocate services during the examination or investigation.

(f)) to (h) CDCR addresses these sections with the CDCR Basic Investigators Course and the PREA Specialized Training for LDI (July 2016). The criminal investigation can be deferred to local law enforcement and be prosecuted by the local Prosecutor. The San Joaquin Police Department is not under the State or DOJ control, but investigative file reviews supported (g) through regular status checks of criminal cases with internal and external entities. California Penal Code (PC) Section 13516 mandates that the Commission on Peace Officer Standards and Training (POST) established guidelines/standards for investigations of sexual assault. All law enforcement agencies must comply with the POST training guidelines for Sexual Assault Investigators. RJD does not close a criminal PREA case, unless an official response is received by local law enforcement or the Prosecutor's Office.

Standard 115.22: Policies to ensure referrals of allegations for investigations

115.22 (a)

- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse? ☒ Yes ☐ No
- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment? ☒ Yes ☐ No

115.22 (b)

- Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? ☒ Yes ☐ No

- Has the agency published such policy on its website or, if it does not have one, made the policy available through other means? ☒ Yes ☐ No
- Does the agency document all such referrals? ☒ Yes ☐ No

115.22 (c)

- If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? [N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).] ☐ Yes ☐ No ☒ NA

115.22 (d)

- Auditor is not required to audit this provision.

115.22 (e)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.12 addresses this standard where RJD demonstrated compliance with all elements of this standard. An administrative or criminal investigation must be completed for all allegations of sexual abuse and sexual harassment. Every allegation is referred to the facility's Investigative Services Unit for investigation. ISU staff conduct all criminal investigations and information regarding agency policy is published on the Department's website. Any investigation involving possible staff misconduct is referred to the agency's Office of Internal Affairs (OIA). OIA is responsible for determining which allegations of staff misconduct warrant an OIA investigation and for completing all investigations in a timely and thorough manner. This was verified during the interviews with the CDCR Agency Head and the ISU/Commander, along with the responses from other random staff. All terminations for violations of agency sexual misconduct or harassment policies, or resignations by employees that would have been terminated if not for their resignation, shall be reported to any relevant licensing body by the hiring authority or designee. This is to include contractors and volunteers

DOM Section 54040.12 requires all allegations of sexual violence, staff sexual misconduct, and sexual harassment shall be investigated and the findings documented in writing. DOM, Section 54040.12 states that all terminations for violations of agency sexual misconduct or harassment policies, or resignations by employees that would have been terminated, if not for their resignation, shall be reported to any relevant licensing body by the hiring authority or designee. This section is also applicable to contractors and volunteers.

The CDCR's website does have links for PREA resources such as Article 44: PREA policy, any changes to the policy, definitions, reporting information and PREA audit reports. The relevant provisions of the DOM are accessible online and a binder version was provided by ISU Investigators.

RJD's PAQ reporting numbers and the supporting document required reconciliation, based on the actual location of the incident. The log identified 88 cases of PREA allegations reported at RJD, during the twelve-month reporting period with one referral for criminal investigation.

If during an interview an inmate-patient referred to a reported PREA incident, then the Audit Team cross-referenced the incident with ISU files to ensure that reports were properly investigated and notifications initiated. These cross checks and interviews of administrators, staff, investigators, and inmate-patients confirmed compliance with the standard. It is evident that RJD ISU completes all investigations on reported PREA incidents. ISU is mandated to complete the Bureau of Justice Statistics' Survey of Sexual Victimization Incident form as a data collection tool to forward to the PREA Coordinator

TRAINING AND EDUCATION

Standard 115.31: Employee training

115.31 (a)

- Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures? ☒ Yes ☐ No
- Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? ☒ Yes ☐ No
- Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? ☒ Yes ☐ No
- Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse? ☒ Yes ☐ No
- Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates? ☒ Yes ☐ No
- Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates? ☒ Yes ☐ No
- Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities? ☒ Yes ☐ No

115.31 (b)

- Is such training tailored to the gender of the inmates at the employee's facility? ☒ Yes ☐ No
- Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa? ☒ Yes ☐ No

115.31 (c)

- Have all current employees who may have contact with inmates received such training? ☒ Yes ☐ No
- Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures? ☒ Yes ☐ No
- In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies? ☒ Yes ☐ No

115.31 (d)

- Does the agency document, through employee signature or electronic verification, that employees understand the training they have received? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☒ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☐ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.4 Education and Prevention address this standard where RJD demonstrated compliance with all elements of this standard. The agency requires states, "All employees, new to the department, regardless of job classification shall receive orientation training within 90 days of appointment." All staff including volunteers and contractors are required to pass an 8-hour PREA training that defines the purpose and intent of the Prison Rape Elimination Act, history of PREA, overview of applicable state law, and the CDCR's "Zero Tolerance Policy" regarding sexual violence towards inmates. Training discusses inmates' right to be free from sexual abuse and harassment and provides information regarding the concept of "consent" which does not exist between staff and offenders, and addresses the LGTBI and gender non-conforming population as a specific group in the PREA standards. RJD also has an on the job training module that is delivered to staff throughout the year. Training records were provided and reviewed by the auditor

DOM section 54040.4 Education and Prevention, states that all staff including volunteers and contractors shall receive instruction related to the prevention, detection, response, and investigation of offender sexual violence, staff sexual misconduct, and sexual harassment. This training is conducted during new employee orientation, annual block training, On Job Training (OJT), and has been adopted by the Correctional Training Academy. The training is gender specific based on the offender population at the assigned institution. Training participation is documented on a CDCR 844, Training Participation Sign-in Sheet and uploaded into the BIS (security) or NEO (health care) program. The supporting documents verified compliance and were retained by

the Auditor. The PREA training curriculum and lesson plan dated November 2015 and DOM section 54040.4 addresses the sections of (a) 1 to 10, and (b).

(c)) to (d) CDCR/RJD memorandum for In-Service Training provides that CDCR staff (custody and health care) shall receive a two-hour formal classroom instruction on PREA and a one hours OJT as part of the annual training block. CDCR documents completion of the required training with CDCR 844 and the PREA OJT Acknowledgement form certifying that the employee has read, understood, and agrees to comply with the PREA OJT training. DOM section 32010.8.3 specifies the record keeping forms required to document training activities. The PAQ indicated that 100% of CDCR staff both custody and health care have been trained on PREA. It should be noted that DSH staff were categorized as contractors and not staff of CDCR. Additional information is included under 115.32.

Standard 115.32: Volunteer and contractor training

115.32 (a)

- Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures? ☒ Yes ☐ No

115.32 (b)

- Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)? ☒ Yes ☐ No

115.32 (c)

- Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.4 Education and Prevention addresses this standard where RJD demonstrated compliance with all elements of this standard. The agency requires states, "All volunteers and contractors, must complete this mandatory orientation training within 90 days of appointment." All staff including volunteers and contractors are required to pass an 8-hour PREA training that defines the purpose and intent of the Prison Rape Elimination Act, history of PREA, overview of applicable state law, and the CDCR's "Zero Tolerance Policy" regarding sexual violence towards inmates. Training discusses inmates' right to be free from sexual abuse and harassment and provides information regarding the concept of "consent" which does not exist between staff and offenders, and addresses the LGTBI and gender non-conforming population as a specific group in the PREA standards. RJD also has an on the job training module that is delivered to staff throughout the year. All staff, including volunteers and contractors, must also complete a mandatory 1-hour annual training session. Training records were provided and reviewed by the auditor

Standard 115.33: Inmate education

115.33 (a)

- During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment? ☒ Yes ☐ No
- During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment? ☒ Yes ☐ No

115.33 (b)

- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?
☒ Yes ☐ No
- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?
☒ Yes ☐ No
- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?
☒ Yes ☐ No

115.33 (c)

- Have all inmates received such education? ☒ Yes ☐ No
- Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility? ☒ Yes ☐ No

115.33 (d)

- Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient? ☒ Yes ☐ No
- Does the agency provide inmate education in formats accessible to all inmates including those who are deaf? ☒ Yes ☐ No
- Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired? ☒ Yes ☐ No
- Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled? ☒ Yes ☐ No
- Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills? ☒ Yes ☐ No

115.33 (e)

- Does the agency maintain documentation of inmate participation in these education sessions?
☒ Yes ☐ No

115.33 (f)

- In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?
☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.4 Education and Prevention addresses this standard where RJD demonstrated compliance with all elements of this standard. Initial offender orientation on PREA is provided to the offender at the reception centers (RC) via written and multi-media presentation on a weekly basis in both English and Spanish. As part of an RJD orientation upon arriving at the facility, all inmates receive an orientation handbook and watch a PREA video where they reinforce PREA training. Posters and materials are posted throughout the

facility and in all areas where inmates could congregate. During interviews with inmates, they acknowledged the PREA information being provided and they knew the agency's zero tolerance policy, the difference between sexual abuse and sexual harassment, and how to contact an outside victim services agency as well as their rights to be free from retaliation for reporting such incidents. Appropriate provisions are made to ensure effective communication for offenders not fluent in English, those with low literacy levels, and those with disabilities. Offender education on PREA are documented on RJD form 128-B that is signed by the offender indicating that they received the training and is forwarded to the inmate's record for scanning into the Electronic Records Management System (ERMS).

DOM Section 54040.4 Education and Prevention for Offenders states that verbal and written information shall be provided to offenders which will address: Prevention/Intervention, Reporting, Treatment and Counseling. Initial offender orientation on PREA is provided to the offender population in reception centers (RC) via either written or multi-media presentation on a weekly basis in both English and Spanish. Approved PREA posters which contain departmental policy and sexual violence, staff sexual misconduct, and harassment reporting telephone numbers shall be posted in designated locations throughout the institution and parole offices. The PREA brochures entitled "Sexual Assault Awareness" and the PREA booklet entitled "Sexual Abuse/Assault: Prevention and Intervention" are distributed during initial processing and the materials are also available through the correctional counselors and the institution's offender orientation handbook.

DOM section 54040.4 indicates that appropriate provisions shall be made to ensure effective communication for offenders not fluent in English, those with low literacy levels, and those with disabilities. Institutions may consider using offender peer educators to enhance the offender's population's knowledge and understanding of PREA and STDs.

RJD Warden issued memorandum mandating that PREA Orientation materials issued to an offender shall be documented on a 128-B form to corroborate that the inmate received the handbook and PREA information. This form is scanned into the ERMS as proof of compliance. During the tour, the Audit Team observed that PREA posters, handouts and orientation handbook information related to PREA was available in English and Spanish.

Standard 115.34: Specialized training: Investigations

115.34 (a)

- In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)

☒ Yes ☐ No ☐ NA

115.34 (b)

- Does this specialized training include techniques for interviewing sexual abuse victims? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] ☒ Yes ☐ No ☐ NA

- Does this specialized training include proper use of Miranda and Garrity warnings? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).]
☒ Yes ☐ No ☐ NA

- Does this specialized training include sexual abuse evidence collection in confinement settings? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).]
☒ Yes ☐ No ☐ NA

- Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).]
☒ Yes ☐ No ☐ NA

115.34 (c)

- Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).]
☒ Yes ☐ No ☐ NA

115.34 (d)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- ☒ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

- ☐ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.1 addresses this standard where RJD demonstrated compliance with all elements of this standard. Locally Designated Investigators (LDI) are assigned to RJD who have been trained to conduct investigations into allegations of sexual violence and/or staff sexual misconduct. Section 54040.4 also states that investigators assigned to sexual violence and/or staff sexual misconduct cases will receive specialized training and that the institutions PCM shall ensure employees investigating these incidents are properly trained.

RJD Corrections Supervisor, must completed PREA training as well as the specialized PREA Investigations training and updated booster training in order to be qualified to conduct investigations. The training included techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse

evidence collections in a confinement setting, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. RJD has a robust Investigation Service Unit that ensures all officers assigned are among the best staff in the facility that demonstrate the highest professional standards.

DOM, Article 44, Prison Rape Elimination Act Policy, section 54040.1 defines the LDIs as institutional staff, who have been trained to conduct investigations into allegations of sexual violence and/or staff sexual misconduct. Section 54040.4 also states that investigators assigned to sexual violence and/or staff sexual misconduct cases will receive specialized training and that the institution PREA CM shall ensure employees investigating PREA incidents are properly trained.

RJD's has 10 LDIs, who were trained to conduct criminal and administrative investigations into allegations of sexual violence and/or staff sexual misconduct. The investigative office at RJD is the Investigative Services Unit (ISU). According to DOM, chapter 5, page 474 and 475, Crime Scene Preservation, Evidence and section

Forensic Medical Examination, the designated supervisor and investigators shall follow a uniform evidence protocol and procedure when conducting sexual abuse investigations.

The Specialized PREA Training for LDI is an 8 hours course. Curriculum for LDI specialized training covers techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. The lesson plan clearly indicates that the mandated topics are covered. Interviews with ISU staff confirmed their understanding of the specialized training curriculum. The Auditor received documentation substantiating that all 10 ISU staff members completed and successfully passed the Specialized PREA Training.

PC Section 293(a) mandates that victims of sex crimes are informed that their name will be a matter of public record, unless an explicit written notice to keep their name from being a part of the public record is process. The notice further informs the individual of the specific agencies that will have access to his/her name, if not included in the public record. This process protects the PREA victim and allows the victim to control his/her situation.

Standard 115.35: Specialized training: Medical and mental health care

115.35 (a)

- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? ☒ Yes ☐ No

- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? ☒ Yes ☐ No

115.35 (b)

- If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams.) ☒ Yes ☐ No ☐ NA

115.35 (c)

- Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? ☒ Yes ☐ No

115.35 (d)

- Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? ☒ Yes ☐ No
- Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.8 addresses this standard where RJD demonstrated compliance with all elements of this standard. The facility has a full medical, mental health and dental services that are available on site. Medical services responsibilities is outlined in Section 54040.8.3 and provides guidance regarding evidence

contamination/preservation, outside medical treatment referrals, and follow up testing for sexually transmitted infections/diseases including HIV. RJD provided the audit team with an evidence collection/preservation kit that is utilized in the preservation and collection of evidence prior to sending an offender for outside medical treatment. Per 54040.9, RJD does not conduct forensic medical examinations. Victims are referred to an off-site Sexual Abuse Response Team (SART) in the local southern California area. SART teams are contract staff comprised of medical personnel including SANE. SART staff receives specialized training in sexual assault response. Forensic examinations are performed by SANE personnel who receive specialized training in conducting forensic medical examinations including the victim and offender-suspect. Upon return to the facility, the offender is assessed by a registered nurse and mental health care staff per Section 54040.10. Agency policy requires medical/mental health care staff to participate in agency PREA training. Training is comprehensive in scope and includes crime scene preservation, evidence collection, evidence handling, investigative interview preparation, interviewing techniques and the detection, notification and reporting of sexual abuse and sexual harassment. RJD did provide documentation of medical/mental health care staff participation in PREA training.

DOM section 54040.4 Education and Prevention, states that all staff including volunteers and contractors shall receive instruction related to the prevention, detection, response, and investigation of offender sexual violence, staff sexual misconduct, and sexual harassment. This training is conducted during new employee orientation, annual block training, OJT, and has been adopted by the Correctional Training Academy. The training is gender specific based on the offender population at the assigned institution. Training participation is documented on a CDCR form 844, Training Participation Sign-in Sheet and uploaded into the BIS (security) or NEO (health care) program.

CDCR /RJD memorandum for In-Service Training provides that CDCR staff (custody and health care) shall receive a two-hour formal classroom instruction on PREA and a one-hour OJT as part of an annual training block. CDCR documents completion of the required training with CDCR form 844 and the PREA OJT Acknowledgement form certifying that the employee has read, understood, and agrees to comply with the PREA OJT training. DOM section 32010.8.3 specifies the record keeping forms required to document training activities. The training documents for CDCR staff under RJD was reviewed and interviews with medical staff verified completion of the Specialized Medical Health Care training.

DOM section 54040.3 states unless an institution has been previously authorized for contracted onsite SART exams, they will utilize the resources available via contract at the local community hospital for SART examination of the victim and offender-suspect.

SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

Standard 115.41: Screening for risk of victimization and abusiveness

115.41 (a)

- Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? ☒ Yes ☐ No
- Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? ☒ Yes ☐ No

115.41 (b)

- Do intake screenings ordinarily take place within 72 hours of arrival at the facility? ☒ Yes ☐ No

115.41 (c)

- Are all PREA screening assessments conducted using an objective screening instrument? ☒ Yes ☐ No

115.41 (d)

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability? ☒ Yes ☐ No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate? ☒ Yes ☐ No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate? ☒ Yes ☐ No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated? ☒ Yes ☐ No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent? ☒ Yes ☐ No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child? ☒ Yes ☐ No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?
☒ Yes ☐ No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?
☒ Yes ☐ No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability? ☒ Yes ☐ No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?
☒ Yes ☐ No

115.41 (e)

- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse? ☒ Yes ☐ No
- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses? ☒ Yes ☐ No
- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse? ☒ Yes ☐ No

115.41 (f)

- Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening? ☒ Yes ☐ No

115.41 (g)

- Does the facility reassess an inmate's risk level when warranted due to a: Referral? ☒ Yes ☐ No
- Does the facility reassess an inmate's risk level when warranted due to a: Request? ☒ Yes ☐ No

- Does the facility reassess an inmate's risk level when warranted due to a: Incident of sexual abuse?
☒ Yes ☐ No
- Does the facility reassess an inmate's risk level when warranted due to a: Receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness? ☒ Yes ☐ No

115.41 (h)

- Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section? ☒ Yes ☐ No

115.41 (i)

- Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

The Interim Report identified corrective action as CDCR was developing an objective screening instrument, based on new directives. RJD was utilize an objective screening instrument and developing training and implement of an objective screen instrument. After the physical audit, Sept 20, 2017 Mr. Santana provided the Departments new P&Ps appropriately addressing the **115.41** PREA Screening tools. RJD ensured that In-Service-Training (IST) department at RJD trained all Custody Supervisors that may potentially screen new inmate arrivals (Sergeants and Lieutenants) regardless of regular assignment in the PREA Screening Process.

CDCR P&P 54040.5 addresses this standard where RJD demonstrated compliance with all elements of this standard. Policy requires initial screening "upon arrival" at a reception center. Upon arrival at an institution, facility, or program a designated custody supervisor shall screen an inmate for an appropriate housing assignment and must evaluate all factors to be considered when completing the Initial Housing Review, including but not limited to: Factors such as race, date of birth, age, weight, height, birth place, and whether the inmate is foreign national, length of sentence, enemies and victimization history, criminal influence demonstrated over other inmates, previous housing status, reasons for prior segregation, history of in-cell assaults and/or violence, security threat group, documented victim of sexual assault, adjudicated cases of being a perpetrator in an act of physical abuse, sexual abuse, sodomy, or other act of force against a cell mate. Restrictions are any case factors which may limit the inmate's housing placement options such as security issues, request for protective custody, medical or mental health issues.

CDCR policy 54040.6. all offenders are reviewed for single cell status at reception center processing, during annual classification reviews, upon referral for transfer, or placement. Consideration is given to predatory behavior, documented and verified instances of being a victim of physical or sexual abuse by other inmates, or a determination that single cell designation is appropriate. Based on the classification committee (including questions related to sexual violence and victimization) the "Electronic Initial Housing Review" is updated to determine the most suitable housing assignment. The "Electronic Initial Housing Review" is completed electronically and retained in accordance with CDCR record keeping policy. Access to inmate records is restricted based on the employee's position within the organization; therefore, only those who need access to screening information are granted access. CDCR policy 54040.6 explicitly prohibits disciplining offenders for refusing to answer, or not disclosing complete information related to their sexual orientation or sexual violence history. RJD provided the audit team with several "initial Housing Review" reports for review. All reports were completed within 72-hour requirement. A review of these documents indicates that reassessments were conducted within the 30-day criteria.

CCR, Title 15, Article 1.6 Inmate Housing Assignments (Section 3269) states that (a) Upon arrival at an institution, facility, or program reception center, a designated custody supervisor shall screen an inmate for an appropriate housing assignment and must evaluate all factors to be considered when completing the Initial Housing Review, including but not limited to factors such as race, date of birth, age, weight, height, birth place, and whether the inmate is foreign national, length of sentence, enemies and victimization history, criminal influence demonstrated over other inmates, previous housing status, reasons for prior segregation, history of in-cell assaults and/or violence, security threat group, nature of commitment offense, documented victim of sexual assault, documented concern, and adjudicated guilty as a perpetrator in an act of physical abuse, sexual abuse, sodomy, or other act of force against a cell mate. Restrictions are any case factors which may limit the inmate's housing placement options such as security issues, request for protective custody, medical or mental health issues.

Memorandum dated September 17, 2015 states PREA standard 115.41 was under development by CDCR. Reception Centers and General Population Institutions PREA CM or designee are required to maintain a list of inmates, who have or reported victimization or abusiveness concerns. This list shall incorporate inmates who have filed complaints, appeals or were involved in a battery incident. The PREA CM is responsible to follow up with the inmate and document the meeting on 128-B (General Chrono). This shall be entered into the ERMS or Strategic Offender Management System (SOMS). The PREA CM shall remove the offender from the list after 30 days from arrival.

DOM section 54040.6 Offender Housing, subsection Single Cell Status indicates that factors for single cell housing includes the initial housing review assessment and responses to sexual violence and victimization. This section specifies that offenders will not be disciplined for refusing to answer, or not disclosing complete information related to their sexual orientation and sexual violence history as required by (h). CCR, Title 15, section 3269 (d) reiterates a presumption for single cell housing based on documented and verified instances of being a victim of in-cell physical or sexual abuse by another inmate or verified predatory behavior towards a cell partner.

DOM section 54040.7 Screening for Appropriate Placement states that based on offender victimization information, the custody supervisor shall discuss housing alternatives with the offender in a private location and single cell housing will be considered prior to the CC review. Mental health staff are mandated to screen the inmate-patient based on the intake referral. Also, any staff member with a concern for an offender's sexual safety can initiate a mental health referral on CDCR Form 128-MH5, Mental Health Referral Chrono.

The agency has procedures that comply with (a) as all offenders at reception or transfer are screened based on PREA factors for sexual victimization and sexual abusiveness. The ERMS under Critical Items for Review has a check box to document that the PREA requirements were considered, however a hard copy of an objective screening instruction was not provided in the PAQ documents.

Standard 115.42: Use of screening information

115.42 (a)

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments? ☒ Yes ☐ No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments? ☒ Yes ☐ No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments? ☒ Yes ☐ No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments? ☒ Yes ☐ No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments? ☒ Yes ☐ No

115.42 (b)

- Does the agency make individualized determinations about how to ensure the safety of each inmate? ☒ Yes ☐ No

115.42 (c)

- When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)? ☒ Yes ☐ No

- When making housing or other program assignments for transgender or intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems? ☒ Yes ☐ No

115.42 (d)

- Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate? ☒ Yes ☐ No

115.42 (e)

- Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments? ☒ Yes ☐ No

115.42 (f)

- Are transgender and intersex inmates given the opportunity to shower separately from other inmates? ☒ Yes ☐ No

115.42 (g)

- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? ☒ Yes ☐ No
- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? ☒ Yes ☐ No
- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.6 addresses this standard where RJD demonstrated compliance with all elements of this standard. Inmate Housing Assignments process is used in keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive and, make individualized determinations in how to ensure the safety of each inmate. This section does take into consideration of predatory behaviors, repeated attempts to physically or sexually abuse another inmate, documented and verified instances of being a victim of in-cell physical or sexual abuse by another inmate, documented sexual harassment, threatened, forced sexual acts. All housing assignments are made by the Sergeant/Lieutenant based upon the information obtained during the individualized intake assessment. Transgender or intersex inmates are identified, and placement and programming is reassessed at least twice a year to review any threats to inmate's safety. Housing decisions for transgender and intersex inmates are reviewed on a case by case basis. 54040.4 states, "each institution shall enable offenders to shower, perform bodily functions, and change clothing without non-medical staff of the opposite biological sex viewing their breast, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks." Transgender and intersex inmates would shower separately in a private shower or when no private shower is available, allowing them to shower at a specific time when no other inmates are using the shower. Furthermore, showers are single stall showers, and have a privacy barrier permanently. An LGTBI inmate was interviewed and indicated that he has the ability to adjust his routine to shower when he feels comfortable and this practice is not prohibited by staff.

CDCR addressed offender housing, bed assignment, education, other programs, and work line assignments based on the Initial Housing Reviews, ERMS information, and other relevant information. The specific requirements of the standard were partially met as CDCR/RJD were impacted by the lack of an objective screening instrument as discussed in 115.41. DOM section 54040.6 Offender Housing, subsection Single Cell Status indicates that factors for single cell housing includes the initial housing review assessment and responses to sexual violence and victimization. CCR, Title 15, section 3269 (d) reiterates a presumption for single cell housing based on documented and verified instances of being a victim of in-cell physical or sexual abuse by another inmate or verified predatory behavior towards a cell partner.

DOM section 54040.7 Screening for Appropriate Placement states that based on offender victimization information, the custody supervisor shall discuss housing alternatives with the offender in a private location and single cell housing will be considered prior to the CC review. Mental health staff are mandated to screen the inmate-patient based on the intake referral. Also, any staff member with a concern for an offender's sexual safety can initiate a mental health referral on CDCR Form 128-MH5, Mental Health Referral Chrono. CCR, Title 15, section 3375.2-Administrative Determinants states, an inmate with a history of sex crimes designated in section 3377.1 (b) shall be housed in accordance with their placement score and shall not be assigned outside the security perimeter. CCR, Title 15, section 3269-Inmate Housing Assignments process is used to separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive by making individualized determinations to ensure the safety of each inmate. This section does take into consideration predatory behaviors, repeated attempts to physically or sexually abuse another inmate, documented and verified instances of being a victim of in-cell physical or sexual abuse by another inmate, and documented sexual harassment, threatened, or forced sexual acts.

Standard 115.43: Protective Custody

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.43 (a)

- Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers? ☒ Yes ☐ No
- If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment? ☒ Yes ☐ No

115.43 (b)

- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible? ☒ Yes ☐ No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible? ☒ Yes ☐ No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible? ☒ Yes ☐ No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible? ☒ Yes ☐ No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The opportunities that have been limited? ☒ Yes ☐ No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The duration of the limitation? ☒ Yes ☐ No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The reasons for such limitations? ☒ Yes ☐ No

115.43 (c)

- Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged? ☒ Yes ☐ No
- Does such an assignment not ordinarily exceed a period of 30 days? ☒ Yes ☐ No

115.43 (d)

- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety? ☒ Yes ☐ No
- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged? ☒ Yes ☐ No

115.43 (e)

- In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

CDCR P&P 54040.6 addresses this standard where RJD demonstrated compliance with all elements of this standard. RJD prohibits the placement of inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made and it has been determined that there are no available alternative means of separation from likely abusers. Inmates who are screened as a high risk of sexual victimization, and subsequently placed in segregated housing have a housing assessment completed within 24 hours of placement into segregated housing. The offender is also scheduled for appearance before the Institution Classification Committee for discussion of housing needs. Inmates placed in segregated housing for protective custody have access to programs, privileges, education, and work opportunities to the extent possible; RJD has a practice to ensure safe housing in general population for the victim. RJD did provide a listing of offenders whose PREA risk assessments indicated risk of sexual victimization and corresponding housing assignments. Staff are monitoring these inmates and recommendations are made when program changes are warranted.

REPORTING

Standard 115.51: Inmate reporting

115.51 (a)

- Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents? ☒ Yes ☐ No

115.51 (b)

- Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency? ☒ Yes ☐ No
- Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials? ☒ Yes ☐ No
- Does that private entity or office allow the inmate to remain anonymous upon request? ☒ Yes ☐ No
- Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? ☒ Yes ☐ No

115.51 (c)

- Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties? ☒ Yes ☐ No
- Does staff promptly document any verbal reports of sexual abuse and sexual harassment? ☒ Yes ☐ No

115.51 (d)

- Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

CDCR P&P 54040.7 addresses this standard where RJD demonstrated compliance with all elements of this standard. RJD has made every effort to ensure multiple ways for offenders to report concerns related to sexual abuse, sexual harassment, retaliation, staff neglect or violation of responsibilities. Offender may report sexual violence, staff sexual misconduct, or sexual harassment that occurs to any staff member, volunteer, contractor, Office of Internal Affairs, Office of the Inspector General, the Inmate Appeals Process, the sexual assault hotline or through a third party. These reports can be verbally or in writing. Reporting requirements state that any employee who observes, or who receives information from any source concerning sexual misconduct, shall immediately report the information or incident directly to the institution head, unit supervisor, or highest-ranking official on duty, who shall then immediately notify the Office of Internal Affairs.

During the facility tour PREA auditor tested the PREA HOT LINE and left messages on three separate occasions, the phones were in good working order. Although the postings in the facility indicate that all calls made from the prisoner phone system are recorded, the calls go to the regional Office of Internal Affairs offices and the information they receive remains confidential to the extent of the source of the complaint outside of receiving it via the hotline. The facility tour revealed posters readily available for offenders, staff and the public to view which provide the number to the PREA Hotline in all areas accessible and frequented by staff, inmates and visitors to the facility. During interviews all inmates were aware of several ways to report sexual abuse, sexual harassment, retaliation, staff neglect or violation of responsibilities. Investigations are initiated as soon as the information is relayed to the PREA Coordinator or Investigative Services Unit (ISU). Randomly interviewed staff are aware of the various methods for prisoners to report. Reports shall be accepted whether verbal, in writing, anonymous or from a third party, and require appropriate documentation. Staff immediately notify their supervisor(s) of any report and they keep this information confidential. During this audit period, there were 6 inmate PREA letters/reports received, evaluated and documented. The PREA team did receive notification/call back from higher authority to RJD thus confirming notification process works in a timely manner.

Standard 115.52: Exhaustion of administrative remedies

115.52 (a)

- Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse. ☐ Yes ☒ No ☐ NA
-

115.52 (b)

- Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a

grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

115.52 (c)

- Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA
- Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

115.52 (d)

- Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA
- If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA
- At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

115.52 (e)

- Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA
- Are those third parties also permitted to file such requests on behalf of inmates? (If a third-party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the

alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

115.52 (f)

- Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA
- After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA
- After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA
- After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA
- Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA
- Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA
- Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

115.52 (g)

- If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54100. Address this standard where RJD demonstrated compliance with all elements of this standard. RJD doesn't impose time limits on when an inmate may submit a grievance. An inmate can file without having to submit to the staff member who is the subject of the grievance, a final decision will be made within 90 days from initial filing, third parties may file on behalf of an inmate and emergency grievances will have a final agency decision within 5 calendar days. Section 54040.7.2 and 54040.7.3 allows a third part to file on the behalf of an inmate. While there are no time limits in reporting a complaint, internal process require any investigation that has been open for a period of 90 days be reviewed by the agency PREA Coordinator and responsible appointing authority for status and/or issues that need to be addressed. This allows for oversight of the investigation without restricting the investigation.

The agency does not allow an inmate to decline the pursuing of an allegation and will investigate all alleged sexual abuse claims regardless of who filed the original appeal.

CDCR §3084.2 Appeal Preparation and Submittal, section (g) states an inmate or parolee shall not submit an appeal on behalf of another person, unless the appeal contains an allegation of sexual violence, staff sexual misconduct, or sexual harassment. This sufficiently addresses the requirements set forth in this standard. §3084.6 section (c)(5) states an appeal may be cancelled for any of the following reasons, which include, but are not limited to... (5) the appeal is filed on behalf of another person, unless it contains allegations of sexual violence, staff sexual misconduct, or sexual harassment of another inmate.

CCR Title 15, Division 3, Chapter 1, Article 8, section 3084 and DOM section 54100 is applicable to the appeals process for inmate-patients. CCR, Title 15, section 3084.8(b) (4) states there shall be no time limits for allegations of sexual violence or staff sexual misconduct. CCR, Title 15, section 3084.2(g) allows an appeal on behalf of another person for allegations of sexual violation, staff sexual misconduct, or sexual harassment. CCR, Title 15, section 3084.6(c) (5) was amended effective October 20, 2016. It reads, an appeal may be cancelled for any of the following reasons, which include, but are not limited to... (5) The appeal is submitted on behalf of another person, unless it contains allegations of sexual violence, staff sexual misconduct, or sexual harassment of another inmate.

Standard 115.53: Inmate access to outside confidential support services

115.53 (a)

- Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations? ☒ Yes ☐ No

- Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? ☒ Yes ☐ No
- Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? ☒ Yes ☐ No

115.53 (b)

- Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws? ☒ Yes ☐ No

115.53 (c)

- Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse? ☒ Yes ☐ No
- Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040. Addresses this standard where RJD demonstrated compliance with all elements of this standard. CDCR has an agreement with the Office of Crime Victims Advocacy (OCVA) to field calls from offenders for advocacy services. OCVA staff will screen the call and transfer the caller to a geographically appropriate victim advocacy organization. Orientation Handbook that is distributed to all inmates contains PREA information and the department's policy, contact information for reporting incidents and information concerning victim advocate and victim support person. The Orientation Handbook advises inmates that the telephone system is recorded and if PREA allegations are identified through the telephone system it will be referred to appropriate staff for inquiry and investigation. RJD indicates that OCVA will provide services to survivors of sexual abuse by ensuring response to the hospital during a SANE exam, presence during all investigatory interviews and legal proceedings and will provide emotional support, crises intervention, information and referrals.

During the tour of the facility posters for OCVA were attached to PREA bulletin boards in all common areas and offices. Interviews with random inmates show that not all of the inmates knew the number or address for the services, they were however, all aware of the postings and where to view them. This is not a negative reflection on the facility, as they have taken great strides to ensure PREA education and related information is disseminated and available to all inmates, who in return also have a responsibility to acknowledge and accept this material.

Based on the amount of postings throughout the facility it is not likely any inmate would be unaware of the information and how to contact them unless it was, as indicated during the interviews, they simply have no need to be familiarized with the information.

RJD Orientation Handbook that is distributed to all inmates contains PREA information and the departments policy, contact information for reporting incidents and information concerning victim advocate and victim support person. The Orientation Handbook advises inmates that the telephone system is recorded and if PREA allegations are identified through the telephone system it will be referred to appropriate staff for inquiry and investigation.

DOM section 54040.8.2-Victim Advocate and Victim Support Person states, victims of rape, unlawful sexual intercourse with person under 18, rape of spouse, sodomy, oral copulation, forcible acts of sexual penetration have a right under PC 264.2 and PC 679.04 to victim advocate and victim support person for both the medical examination and investigatory interview.

In incidents where an offender has alleged sexual violence or staff sexual misconduct, the watch commander or designee shall immediately notify the local Rape Crisis Center whenever a victim of sexual violence or staff sexual misconduct, is treated at the local SART location and/or transported to an outside hospital for any forensic examination.

RJD Facility Supplement to DOM section 54040.1, RJD utilizes the SANE/SAFE services from SJGH. These exams are conducted by a SANE/SAFE staff employed by SJGH. DOM section 54040.8.2 codifies the right for a PREA victim to have a victim advocate and/or support person for medical examinations and the investigatory interview. Victim advocates require training to provide emotional support, crisis intervention, and information about other applicable referrals.

Standard 115.54: Third-party reporting

115.54 (a)

- Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment? ☒ Yes ☐ No
- Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040. Addresses this standard where RJD demonstrated compliance with all elements of this standard. The CDCR has created three Sexual Abuse Hotlines available to prisoners, staff, and the community. All three hotline numbers were called and were in working order. This information is also available throughout the facility on the postings in order to allow an inmate to personally report or give the information to a third party to report on their behalf. The CDCR website <http://www.cdcr.ca.gov/PREA> provides a method to receive third-party reports of inmate sexual abuse or sexual harassment from any member of the public whom can access it. The website outlines ways that visitors, inmate family members or associates, and other community members can privately report a PREA situation. The website was in working order when checked during the audit. Additionally, the CDCR has entered into an agreement with the Office of Internal Affairs and the Ombudsman's Office to accept reports by mail or phone.

OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

Standard 115.61: Staff and agency reporting duties

115.61 (a)

- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency? ☒ Yes ☐ No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment? ☒ Yes ☐ No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation? ☒ Yes ☐ No

115.61 (b)

- Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions? ☒ Yes ☐ No

115.61 (c)

- Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section? ☒ Yes ☐ No
- Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services? ☒ Yes ☐ No

115.61 (d)

- If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable person's statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws? ☒ Yes ☐ No

115.61 (e)

- Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.7 addresses this standard where RJD demonstrated compliance with all elements of this standard. Staff immediately and confidentially reports any PREA violation by staff or inmates whether witnessed or reported, to the appropriate supervisor. Employees also have a responsibility to assist the offender and refer them to medical/mental health for evaluation. Volunteers/Contractors are also required to report incidents of sexual violence, harassment and staff sexual misconduct to appropriate staff. RJD Health Care Services policy, states that providers are required to report allegations of sexual violence, staff sexual misconduct, and sexual harassment to include informing patients of the provider's duty to report, and the limitation of confidentiality, at the initiation of services. 54040.12-Investigations, all allegations of sexual violence, staff sexual misconduct, and sexual harassment shall be investigated and the findings documented in writing, it further states that allegations reported to the Hiring Authority, the allegation will be assigned to an LDI to conduct an investigation and utilizing standard investigatory procedures.

RJD staff are trained to report any knowledge, suspicion or information regarding an incident of sexual abuse, sexual harassment that occurred in a correctional facility. During staff interviews, all were aware that they are

prohibited from revealing any information related to a sexual abuse report to anyone other than and to the extent necessary to manage treatment, investigation, and other security decisions.

DOM section 54040.7 requires that staff immediately and confidentially report any PREA violation by staff or inmates whether witnessed or reported, to the appropriate supervisor. In addition to reporting, employees have a responsibility to assist the offender and refer him/her to medical/mental health for evaluation.

Volunteers/Contractors are also required to report incidents of sexual violence, harassment and staff sexual misconduct to appropriate staff.

CDCR Health Care Services policy, chapter 16, 1.16.1 states that providers are required to report allegations of sexual violence, staff sexual misconduct, and sexual harassment to include informing patients of the provider's duty to report, and the limitation of confidentiality, at the initiation of services.

According to DOM section 54040.12: Investigations, all allegations of sexual violence, staff sexual misconduct, and sexual harassment shall be investigated and the findings documented in writing and the allegation will be assigned to an LDI for administrative and/or criminal investigations utilizing standard investigatory procedures as covered by the Specialized Investigations training. RJD's investigative unit is referred to as ISU, as previously indicated.

DOM sections 54040.8-Response and 54040.8.1-Custody Supervisor Responsibilities require that all allegations of sexual violence or staff sexual misconduct be treated confidential and any disclosures only be made to employees who "need to know" and to other persons or entities as permitted or required by law.

During random staff interviews it was evident that staff are fully aware of their mandatory reporting and confidentiality obligations, inclusive of any retaliation for reporting a PREA allegation. The CDCR Form 2304, Protection Against Retaliation (PAR) is utilized to track and document monitor activities of RJD ISU and RJD PREA CM based on DOM section 54040.13: Allegations for Follow-up.

During random medical and mental health interviews, it was verified that inmate-patients are advised that there are limits to confidentiality based on their primary status as inmates, during the initial medical and/or mental health orientation. This is in addition to the intake orientation process based on the transfer to RJD. Informed consent forms are also obtained from inmate-patients during the medical and/or mental health orientation process. RJD staff are required to comply with PC section 15600: Elder Abuse and Dependent Adult Civil Protection Act, which requires health practitioners, care custodians, clergy members, and the employees of county adult protective service agencies and local law enforcement agencies to report known or suspected cases of abuse resulting in possible civil and criminal actions.

Standard 115.62: Agency protection duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.62 (a)

- When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.7 Address this standard where RJD demonstrated compliance with all elements of this standard. The PREA Risk Assessment Policy requires information from the risk screening to be considered. The PREA Response Policy 490.850 requires immediate action to protect inmates from sexual abuse. RJD complies with the Agency Protection Duties that outlines staff responsibilities. When staff learns that an inmate is subject to a substantial risk of imminent sexual abuse, the staff member is required to take immediate action to protect the inmate. All staff interviewed knew and could describe what actions they would take if they received information indicating an offender was at imminent risk of sexual abuse.

54040.6-Offender Housing states that inmates at high risk for sexual victimization, as identified on the electronic Initial Housing Review, shall not be placed in segregated housing unless an assessment of all available alternatives has been completed, and a determination has been made that there is no available alternative means of separation from likely abusers.

The Warden confirmed when an inmate is subject to substantial risk they are separated from the threat in the least restrictive method possible (relocated) and assessed in order for staff to take the appropriate action needed to ensure their safety.

Standard 115.63: Reporting to other confinement facilities

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.63 (a)

- Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred? ☒ Yes ☐ No

115.63 (b)

- Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation? ☒ Yes ☐ No

115.63 (c)

- Does the agency document that it has provided such notification? ☒ Yes ☐ No

115.63 (d)

- Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.7 addresses this standard where RJD demonstrated compliance with all elements of this standard. RJD immediately takes action and keeps an offender safe, when it is learned that a new intake may be at risk of sexual abuse. Within 72 hours after receiving an allegation of sexual abuse at another facility reports are generated to the new confinement facilities appointing authority or facility administrator. Documentation of the allegation of sexual abuse at another facility is then processed to the State PREA Coordinators office for appropriate tracking and follow-up.

Notification from/to Other Confinement Facilities state that upon receiving an allegation that an offender was the victim of sexual violence or staff sexual misconduct while confined at another institution/confinement facility, the hiring authority where the allegation was received shall notify the hiring authority of the institution or appropriate office of the agency where the alleged incident occurred. The notification shall be made via telephone contact or electronic mail and will be followed up with a written summary. Notifications must be made as soon as possible but no later than 72 hours. The institution or facility where the alleged sexual violence or staff sexual misconduct is reported will be responsible to complete the SSV-IA form. This section further states the Hiring Authority or agency office receiving the notification shall assign and ensure that the allegation is investigated and reported in accordance with DOM section 54040.12.

All key staff interviewed knew and could describe what actions they would take if they received information indicating an offender was at imminent risk of sexual abuse.

Standard 115.64: Staff first responder duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.64 (a)

- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser? ☒ Yes ☐ No
- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence? ☒ Yes ☐ No
- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? ☒ Yes ☐ No
- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? ☒ Yes ☐ No

115.64 (b)

- If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.8 addresses this standard where RJD demonstrated compliance with all elements of this standard. RJD has extensive information explaining the duties of staff that first responders will do when learning of allegations of sexual abuse or acts of sexual abuse. Custody Supervisor Responsibilities require that all allegations of sexual violence or staff sexual misconduct be treated as confidential and any disclosures will be made only to employees who “need to know” and to other persons or entities as permitted or required by law. Initial contact staff will take the alleged victim to a private secure location and utilize the Initial Contact Guide to complete the tasks associated with preservation of evidence, requesting that the alleged victim not take any actions that could destroy physical evidence. The custody supervisor shall ensure that a perimeter has been established and an officer has been posted to keep persons out of the crime scene area and keep a chronological log of all persons entering the crime scene area and purposes for doing so. A checklist to follow in these incidents was developed and currently in use is with all watch commanders.

A review of the investigation files indicate staff do an excellent job of managing their duties as first responders and follow all of the required steps to keep both the alleged victim safe as well as the alleged abuser. In all cases, staff took immediate action and followed the proper protocol. All staff knew of their first responder responsibilities that included to separate the alleged victim and abuser and what steps to take to protect and preserve evidence and not allow the victim or abuser to take any action that would destroy physical evidence if the alleged incident took place within a time frame that would still allow for collection of that evidence. Staff understands that they must maintain confidentiality by only sharing information with those with the direct need to know.

All staff interviewed during the tour, during random staff interviews and during First Responder interviews knew how to respond to and appropriately handle allegations of sexual assault as a first responder.

DOM sections 54040.8-Response and 54040.8.1-Custody Supervisor Responsibilities require that all allegations of sexual violence or staff sexual misconduct be treated as confidential and any disclosures only be made to employees who “need to know” and to other persons or entities as permitted or required by law. Initial contact will take the alleged victim to a private secure location and utilize the Initial Contact Guide to complete the tasks associated with the initial contact which includes preservation of evidence, requesting that the alleged victim not take any actions that could destroy physical evidence.

The custody supervisor shall ensure that a perimeter has been established and an officer has been posted to keep persons out of the crime scene area and keep a chronological log of all persons entering the crime scene area and purposes for doing so. A checklist for watch commanders to follow in these incidents is currently being utilized to assist supervisors. All staff, contractors, and volunteers are provided a “pocket guide” for PREA incidents, which reiterates need to preserve evidence.

During interviews with security staff, health care staff, and mental health staff, the first responder duties were articulated and comprehended. Interview with DHS staff indicated a general understanding for preserving evidence, but DHS staff are not currently working at RJD based on the transition that occurred in July 2017.

Standard 115.65: Coordinated response

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.65 (a)

- Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.1 addresses this standard where RJD demonstrated compliance with all elements of this standard. The PREA Response Policy states that each prison, work release, and field office will maintain a PREA Response Plan that provides detailed instructions for responding to allegations of sexual misconduct. The plan coordinates response to an incident of sexual abuse among first responders, supervisors, law enforcement, medical and mental health practitioner, investigators, and facility leadership. Interview with the Appointing Authority, Facility Superintendent, and Supervisor demonstrated knowledge and practice which further supported compliance with this standard. The facility practiced drills to test staff on their knowledge and procedures when dealing with this situation.

RJD has outlined everyone's responsibilities and the PREA Review Committee is utilized to ensure all elements of the standard are met for each incident reported. A review of the investigative files shows each incident is reviewed by the PREA Review Committee as required to ensure compliance is met as well as looking for areas of opportunity to improve or correct performance and/or to enhance the inmate and staff safety of the RJD.

Standard 115.66: Preservation of ability to protect inmates from contact with abusers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.66 (a)

- Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any

inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? ☒ Yes ☐ No

115.66 (b)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR Collective Bargaining Unit 6 addresses this standard where RJD demonstrated compliance with all elements of this standard. Current collective bargaining unit contract does not limit management's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. This process allows for the PREA Investigations to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff. The policy states that when a PREA investigation is initiated, supervisor where the alleged victim is housed will monitor to assess indicators or reports of retaliation against victims and reporters, and the indicators listed may include, but are not limited to: disciplinary reports, changes in grievance trends, housing/program changes, reassignments, negative performance reviews, transfers and/or staff authorize leave with or without pay.

Standard 115.67: Agency protection against retaliation

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.67 (a)

- Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff? ☒ Yes ☐ No

- Has the agency designated which staff members or departments are charged with monitoring retaliation?
☒ Yes ☐ No

115.67 (b)

- Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? ☒ Yes ☐ No

115.67 (c)

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? ☒ Yes ☐ No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? ☒ Yes ☐ No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation? ☒ Yes ☐ No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports? ☒ Yes ☐ No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes? ☒ Yes ☐ No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes? ☒ Yes ☐ No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff? ☒ Yes ☐ No

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?
☒ Yes ☐ No
- Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? ☒ Yes ☐ No

115.67 (d)

- In the case of inmates, does such monitoring also include periodic status checks? ☒ Yes ☐ No

115.67 (e)

- If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation? ☒ Yes ☐ No

115.67 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.13 addresses this standard where RJD demonstrated compliance with all elements of this standard. Policy indicates retaliation monitoring will occur for 90 days following the allegation or longer if the facility PREA authority determines it's necessary.

Specifically, retaliatory measures against employees and offenders who report incidents of sexual violence, staff sexual misconduct or sexual harassment as well as retaliatory measures against those who cooperate with investigations shall not be tolerated and shall result in disciplinary action and/or criminal prosecution. Any retaliatory measures such as coercion, threats of punishment, or any other activity intended to discourage or prevent staff or offenders from reporting or cooperating with investigations will not be tolerated. 31010.1 and specifically address a prohibition against retaliation against staff. RJD employs multiple protection measures as outlined in DOM Section 54040.7, which details staff responsibility to protect the offenders in their custody. This includes immediate reporting, assisting offenders with receiving medical/mental health care, and discussing housing requirements necessary to maintain the offender's safety. This includes considering housing victims with other offenders who have compatible needs in lieu of segregation when appropriate or single cell placement.

Interviews were conducted with the Supervisors regarding the agencies process to protect inmate from staff retaliation. All were well able to describe retaliation monitoring and what actions would be taken if indications of retaliation were observed.

Standard 115.68: Post-allegation protective custody

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.68 (a)

- Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

CDCR P&P 54040.6 addresses this standard where RJD demonstrated compliance with all elements of this standard. RJD is committed to ensure that inmates will not be placed in involuntary segregation unless an assessment of all available alternatives has been made and a determination is made that no alternative is available. The facility will assess any inmate in these circumstances within 24 hours and then within 10 days by the Institution Classification Committee.

INVESTIGATIONS

Standard 115.71: Criminal and administrative agency investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.71 (a)

- When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] ☒ Yes ☐ No ☐ NA
- Does the agency conduct such investigations for all allegations, including third party and anonymous reports? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] ☒ Yes ☐ No ☐ NA

115.71 (b)

- Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34? ☒ Yes ☐ No

115.71 (c)

- Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? ☒ Yes ☐ No
- Do investigators interview alleged victims, suspected perpetrators, and witnesses? ☒ Yes ☐ No
- Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? ☒ Yes ☐ No

115.71 (d)

- When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution? ☒ Yes ☐ No

115.71 (e)

- Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff? ☒ Yes ☐ No
- Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding? ☒ Yes ☐ No

115.71 (f)

- Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? ☒ Yes ☐ No
- Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings? ☒ Yes ☐ No

115.71 (g)

- Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible? ☒ Yes ☐ No

115.71 (h)

- Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? ☒ Yes ☐ No

115.71 (i)

- Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years? ☒ Yes ☐ No

115.71 (j)

- Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation? ☒ Yes ☐ No

115.71 (k)

- Auditor is not required to audit this provision.

115.71 (l)

- When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.8.1 address this standard where RJD demonstrated compliance with all elements of this standard. Investigations of sexual abuse and sexual harassment. The policies dictate all facilities conduct investigations into allegations of sexual abuse and harassment immediately upon becoming aware of the allegation, regardless of how the report is received. This is verified during the interview with investigative ISU staff. 54040.4 states that investigators assigned to sexual violence and/or staff sexual misconduct cases will receive specialized training.

The Department's Basic Investigator Training and PREA Locally Designated Investigator (LDI) training detail how and when investigations are conducted. RJD investigators are sworn Peace Officers and handle criminal as well as administrative investigations. All ISU staff members have received specialized PREA investigation training as reflected in the training documents reviewed. The investigative staff interviewed covered what was received during training including how to handle sexual abuse investigations, interviewing victims, and evidence collection and preservation. All staff knew the elements of completing a comprehensive investigation. Investigative files were reviewed and all the appropriate documentation was present, including, interviews, evidence collection methods and results, witness reports, information on the methodology on arriving to the conclusion, including the review of both the victim and perpetrator histories, and a proper conclusion, including any referrals for criminal prosecution to the prosecutor's office.

CDCR's Office of Internal Affairs Investigator's Field guide mandates that should an employee invoke his/her right under Miranda, the investigator shall consult with the SAC and the local District Attorney (DA) in the county that the case will be referred to regarding the decision to take a compelled statement. Interviews with the ISU investigators confirmed they do consult with DA when evidence appears to support criminal prosecution. Referral for Criminal Prosecution states that all criminal misconduct by persons under the jurisdiction of the department or occurring on facility property shall be referred by the institution head or designee to appropriate authorities for possible investigation and prosecution when there is evidence substantiating each of the elements of the crime to be charged.

states that CDCR shall ensure that all PREA data collected are securely retained and are maintained for 10 years after the date of the initial collection. The PREA instructions for records retention schedule (RRS) Update states that Investigatory file is to be retained in the ISU for a minimum of 10 years or for as long as the alleged abuser is incarcerated or employed by the agency, plus five years, whichever is longer.

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Standard 115.72: Evidentiary standard for administrative investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.72 (a)

- Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

CDCR P&P 52080.9.3 address this standard where RJD demonstrated compliance with all elements of this standard. The agency shall impose no standard higher than preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated or non-substantiated. Interviews with investigative staff verify the practice of utilizing the preponderance of the evidence standard is utilized at the facility. RJD conducts its own administrative investigations and investigations that are criminal in nature. CDCR Policy on PREA Investigations indicated that investigations conducted will be done thoroughly, promptly and objectively. All allegations that appear to be criminal in nature are referred to local and/or state AG agencies for criminal prosecution

Standard 115.73: Reporting to inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.73 (a)

- Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded? ☒ Yes ☐ No

115.73 (b)

- If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to

inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.) ☒ Yes ☐ No ☐ NA

115.73 (c)

- Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit? ☒ Yes ☐ No
- Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility? ☒ Yes ☐ No
- Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility? ☒ Yes ☐ No
- Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?
☒ Yes ☐ No

115.73 (d)

- Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility? ☒ Yes ☐ No
- Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility? ☒ Yes ☐ No

115.73 (e)

- Does the agency document all such notifications or attempted notifications? ☒ Yes ☐ No

115.73 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- ☒ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☐ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.12.5 address this standard where RJD demonstrated compliance with all elements of this standard. RJD ensures that the findings of the investigation will be reported to the offender, and/or will request investigative reports from outside investigators, as to whether the allegation has been substantiated, unsubstantiated, or unfounded. If the accused has been indicted on or convicted of a charge related to the sexual abuse, if the employee is no longer assigned to the offender's unit or no longer works at the same facility as the offender. Notifications are provided to offender in a confidential manager, either personally, through legal mail.

The agency's obligation to report or inform the offender shall terminate if the offender is released from the agency's custody. Notifications are documented on the PREA Investigations Finding Sheet and samples were provided as documentation.

DISCIPLINE

Standard 115.76: Disciplinary sanctions for staff

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.76 (a)

- Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies? ☒ Yes ☐ No

115.76 (b)

- Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse? ☒ Yes ☐ No

115.76 (c)

- Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories? ☒ Yes ☐ No

115.76 (d)

- Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies (unless the activity was clearly not criminal)? ☒ Yes ☐ No
- Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 33030.15 addresses this standard where RJD demonstrated compliance with all elements of this standard. RJD policy violations require disciplinary sanctions up to and including termination for sexual abuse or sexual harassment. 3401.5 (a)-Employee Sexual Misconduct states that any sexual behavior between an inmate / parolee, departmental employee, volunteer, agent or individual working on behalf of CDCR shall subject the employee to disciplinary action and/or prosecution under the law. There are five types of penalties for adverse actions; Letter of Reprimand, Salary Reduction, Suspension without Pay, Demotion to a Lower Class, and Dismissal from State Service.

CDCR shall ensure that all PREA data collected are securely retained and are maintained for 10 years after the date of the initial collection. The PREA instructions for records retention schedule (RRS) Update states that Investigatory file is to be retained in the ISU for a minimum of 10 years or for as long as the alleged abuser is incarcerated or employed by the agency, plus five years, whichever is longer

Standard 115.77: Corrective action for contractors and volunteers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.77 (a)

- Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?
☒ Yes ☐ No
- Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)? ☒ Yes ☐ No
- Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?
☒ Yes ☐ No

115.77 (b)

- In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.12.4 addresses this standard where RJD demonstrated compliance with all elements of this standard. RJD ISU staff state they will investigate allegations reported against contractors/volunteers as any other PREA case and would refer allegations for criminal prosecution if warranted.

Any contractor or volunteers who engages in staff sexual misconduct shall be prohibited from contact with the offenders and shall be reported the hiring authority or designee and are subject to administrative and/or criminal investigation including possible referral to the District Attorney, unless the activity was clearly not criminal, and shall be subject to reporting to relevant licensing bodies. The agreement also states that by signing the contract they agree to all provisions and shall abide by the laws, rules and regulations governing conduct in associating with prison inmates or wards. 101090.9-Termination states that the hiring authority may limit or discontinue activities of any volunteer or group which may impede the security and/or orderly operation or threatens security and safety of the volunteer, employees, public, or inmates. Termination can be carried out in an expeditious manner if there is evidence of volunteer misconduct that includes acts of inappropriate familiarity with inmates, parolees, participating in behavior either on or off duty that is of such nature that it may cause discredit to CDCR or its services. Any contractor or volunteer at RJD that has a substantiated PREA allegation are terminated and flagged in the State Volunteer Share Point site.

Standard 115.78: Disciplinary sanctions for inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.78 (a)

- Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process? ☒ Yes ☐ No

115.78 (b)

- Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories? ☒ Yes ☐ No

115.78 (c)

- When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior? ☒ Yes ☐ No

115.78 (d)

- If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits? ☒ Yes ☐ No

115.78 (e)

- Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact? ☒ Yes ☐ No

115.78 (f)

- For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation? ☒ Yes ☐ No

115.78 (g)

- Does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)
☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.15 addresses this standard where RJD demonstrated compliance with all elements of this standard. Offenders are subject to disciplinary actions if they are found in violation and adjudicated as guilty of misconduct. RJD indicates that the sanction shall be commensurate with the nature and circumstances the incident and the offender. This process takes into account the inmate's mental disabilities/illness that contributed to his/her behavior when considering why type of sanction, if any, should be imposed. The Agency does not allow for consensual sexual relations. Offenders are disciplined for sexual contact with staff only upon finding that the staff member did not consent to such contact and inmates are not subject to discipline for a report of sexual abuse made in good faith. 54040.15.1, Alleged Victim-False Allegations states that CDCR and its facilities will not apply disciplinary action against an inmate for filing any report of sexual violence, or staff sexual misconduct, unless it is clearly demonstrated and documented that the inmate knowingly made a false report. An allegation deemed unsubstantiated or unfounded based on lack of evidence, does not constitute false reporting.

MEDICAL AND MENTAL CARE

Standard 115.81: Medical and mental health screenings; history of sexual abuse

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.81 (a)

- If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? ☒ Yes ☐ No

115.81 (b)

- If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.) ☒ Yes ☐ No ☐ NA

115.81 (c)

- If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? ☒ Yes ☐ No

115.81 (d)

- Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law? ☒ Yes ☐ No

115.81 (e)

- Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.7 addresses this standard where RJD demonstrated compliance with all elements of this standard. If reported by an inmate during intake screening, he has experienced prior sexual victimization or previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure the inmate is referred to mental health utilizing the CDCR form 128-MH5, Mental Health Referral Chrono. In addition, any staff member with significant concern an inmate may be subject to sexual victimization, shall immediately notify a custody supervisor who will refer that inmate for a mental health evaluation per existing policy regarding mental health referrals. Health Care Services will ensure that medically necessary emergency and follow-up treatment is provided to patients who are alleged victims or suspects of sexual violence, staff sexual misconduct, and sexual harassment. There is no cost to the alleged victim regardless of whether they name the abuser or cooperate with any investigation arising from the incident.

Information related to sexual victimization or abusiveness occurring in an institutional setting is strictly limited to medical and mental health practitioners, and other staff only as necessary to inform treatment plans, security and management decisions. Medical and Mental Health staff only have access to the electronic medical records and information would only be shared if it is absolutely necessary for treatment and security decisions as indicated above.

Standard 115.82: Access to emergency medical and mental health services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.82 (a)

- Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment? ☒ Yes ☐ No

115.82 (b)

- If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62? ☒ Yes ☐ No
- Do security staff first responders immediately notify the appropriate medical and mental health practitioners? ☒ Yes ☐ No

115.82 (c)

- Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate? ☒ Yes ☐ No

115.82 (d)

- Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.7 addresses this standard where RJD demonstrated compliance with all elements of this standard. RJD has full medical and mental health staff on site. If services are not available then every offender has the opportunity to receive medical care at any of the local hospitals in the immediate area. Inmates who report sexual abuse are provided immediate access to medical care provided at no expense to the offender. If a report of sexual abuse is received, staff takes immediate steps to protect the offender and report the information to the appointing authority or duty officer and make immediate notification. 54040.10 states that upon return of the victim from the SART/SANE Exam one of the processes are that the offender, if appropriate, shall be given educational materials to provide information related to the medical and mental health conditions which may have resulted after a sexual violence/staff sexual misconduct incident. Health care staff will ensure a follow-up testing for sexually transmitted infectious diseases (STI/STD), and HIV, as indicated; and provide follow-up clinical care as indicated.

There are no financial costs for the inmate in regard to treatment and services related to sexual abuse or assault, regardless of whether the victim names the abuser or cooperates with any investigation arising from the incident.

Standard 115.83: Ongoing medical and mental health care for sexual abuse victims and abusers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.83 (a)

- Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility? ☒ Yes ☐ No

115.83 (b)

- Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody? ☒ Yes ☐ No

115.83 (c)

- Does the facility provide such victims with medical and mental health services consistent with the community level of care? ☒ Yes ☐ No

115.83 (d)

- Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.) ☐ Yes ☐ No ☒ NA

115.83 (e)

- If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if all-male facility.) ☐ Yes ☐ No ☒ NA

115.83 (f)

- Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate? ☒ Yes ☐ No

115.83 (g)

- Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident? ☒ Yes ☐ No

115.83 (h)

- If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.10 addresses this standard where RJD demonstrated compliance with all elements of this standard. RJD medical, mental health, treatment, and follow up services are offered to all inmates who have been victimized by sexual abuse in any institution. CDCR provides follow-up medical and mental health services to include treatment plans and when necessary referrals for continued care when transferred or placed in other facilities. RJD has full medical and mental health staff on site. Health care staff ensure a follow-up

testing for sexually transmitted infectious diseases (STI/STD), and HIV, as indicated; and provide follow-up clinical care as indicated. There are no financial costs for the inmate regarding treatment and services related to sexual abuse or assault, regardless of whether the victim names the abuser or cooperates with any investigation arising from the incident. Investigative Reports and medical/mental health reports reviewed during the audit reflect victims are receiving medical and mental health care as required

DATA COLLECTION AND REVIEW

Standard 115.86: Sexual abuse incident reviews

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.86 (a)

- Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded? ☒ Yes ☐ No

115.86 (b)

- Does such review ordinarily occur within 30 days of the conclusion of the investigation? ☒ Yes ☐ No

115.86 (c)

- Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners? ☒ Yes ☐ No

115.86 (d)

- Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse? ☒ Yes ☐ No
- Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility? ☒ Yes ☐ No
- Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse? ☒ Yes ☐ No
- Does the review team: Assess the adequacy of staffing levels in that area during different shifts?
☒ Yes ☐ No

- Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff? ☒ Yes ☐ No
- Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1) - (d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager? ☒ Yes ☐ No

115.86 (e)

- Does the facility implement the recommendations for improvement, or document its reasons for not doing so? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.17 addresses this standard where RJD demonstrated compliance with all elements of this standard. Within 60 days of discovery of the sexual abuse incident RJD conducts a review to ensure proper procedures were followed. The Institution Head or designee, PREA Compliance Manager, Designated Managerial employee, In-Service training Manager Health Care and Mental Health staff will be part of the review team. A review of facility investigation files provided documentation showing all Sexual Abuse Incident Reviews are being conducted within 30 days of the investigation being finalized. This meets the standard and agency policy regarding the reviews. During interviews with the review team it was clear that they understood that upon conclusion of every sexual abuse investigation that has been substantiated or unsubstantiated, an incident review is required and they were able to describe the review process.

Standard 115.87: Data collection

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.87 (a)

- Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions? ☒ Yes ☐ No

115.87 (b)

- Does the agency aggregate the incident-based sexual abuse data at least annually? ☒ Yes ☐ No

115.87 (c)

- Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?
☒ Yes ☐ No

115.87 (d)

- Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews? ☒ Yes ☐ No

115.87 (e)

- Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.) ☒ Yes ☐ No ☐ NA

115.87 (f)

- Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.19 addresses this standard where RJD demonstrated compliance with all elements of this standard. RJD has a procedure to collect accurate, uniform data for every allegation of sexual abuse at the facilities under its direct control. CDCR uses the SSV-IA form as a standardized instrument with a set of definitions for all allegations of sexual abuse and misconduct incidents. The Office of Internal Affairs maintains records of investigations into allegations of staff/offender sexual misconduct, and will report by case number, the type of sexual misconduct, subcategory; whether the allegations were sustained; and whether a DA referral was made. The data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the SSV conducted by the Federal Department of Justice. CDCR shall maintain, review, and collect data as needed from all available documents including incident reports, investigation files, and PREA incident reviews.

RJD Investigation files reviewed during audit confirmed the forms are being sent to CDCR. Agency data is compiled on a yearly tracking report and updated as investigations are concluded. Tracking reports were reviewed and show data being collected. All reports are available to the general public via the Agency's website <http://www.cdcr.ca.gov/Reports/>.

Standard 115.88: Data review for corrective action

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.88 (a)

- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas? ☒ Yes ☐ No
- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis? ☒ Yes ☐ No
- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole? ☒ Yes ☐ No

115.88 (b)

- Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse ☒ Yes ☐ No

115.88 (c)

- Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means? ☒ Yes ☐ No

115.88 (d)

- Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.17 addresses this standard where RJD demonstrated compliance with all elements of this standard. In order to assess and improve the effectiveness of its sexual violence prevention, detection, and response policies, practices and training. On an annual basis the Department PREA Coordinator will forward to each institution, a data collection toll which will be utilized by the institutional PCM to summarize information gathered through the institutional PREA committee. The departmental PREA Coordinator will prepare an annual report of the findings and corrective actions for each facility, as well as the agency as a whole. The final report will be routed through the chain of command to the agency Secretary for review and approval; once it is approved the report will be forwarded to the Office of Public and Employee Communication for placement on the CDCR Website. <http://www.cdcr.ca.gov/PREA/Reports-Audits.html>

Standard 115.89: Data storage, publication, and destruction

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.89 (a)

- Does the agency ensure that data collected pursuant to § 115.87 are securely retained? ☒ Yes ☐ No

115.89 (b)

- Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means? ☒ Yes ☐ No

115.89 (c)

- Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available? ☒ Yes ☐ No

115.89 (d)

- Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.20 addresses this standard where RJD demonstrated compliance with all elements of this standard. CDCR data is securely maintained and retained. The system allows standardized collection data as required by the PREA Standard. The data is made available to the public through the Agency website, and requires identifiers to be removed and data to be maintained for at least 10 years. Facility files were found to be kept in a secure area and only accessed by authorized staff. The Agency website was reviewed and PREA information was posted and easily available to the public. <http://www.cdcr.ca.gov/PREA/Reports-Audits.html>

All data and reports are submitted to the U.S. Department of Justice upon request. The PREA Coordinator maintains electronic records of sexual abuse and sexual harassment cases pursuant to the state's Records Retention Schedule. All investigation records are retained for five years after the close of the investigation. Excluded are records covered by the Prison Rape Elimination Act which are retained for 50 years after the close of the investigation. This includes incident and investigative reports, evidence cards, photographs, interviews, and other related items.

AUDITING AND CORRECTIVE ACTION

Standard 115.401: Frequency and scope of audits

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.401 (a)

- During the three-year period starting on August 20, 2013, and during each three-year period thereafter, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (N/A before August 20, 2016.) ☐ Yes ☒ No ☐ NA

115.401 (b)

- During each one-year period starting on August 20, 2013, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited? ☐ Yes ☒ No

115.401 (h)

- Did the auditor have access to, and the ability to observe, all areas of the audited facility? ☒ Yes ☐ No

115.401 (i)

- Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? ☒ Yes ☐ No

115.401 (m)

- Was the auditor permitted to conduct private interviews with inmates, residents, and detainees? ☒ Yes ☐ No

115.401 (n)

- Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel? ☒ Yes ☐ No

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

CDCR P&P 54040.20 addresses this standard where RJD demonstrated compliance with all elements of this standard. CDCR data is securely maintained and retained. The system allows standardized collection data as required by the PREA Standard. The data is made available to the public through the Agency website, and requires identifiers to be removed and data to be maintained for at least 10 years. Facility files were found to be kept in a secure area and only accessed by authorized staff. The Agency website was reviewed and PREA information was posted and easily available to the public. <http://www.cdcr.ca.gov/PREA/Reports-Audits.html>

All data and reports are submitted to the U.S. Department of Justice upon request. The PREA Coordinator maintains electronic records of sexual abuse and sexual harassment cases pursuant to the state's Records Retention Schedule. All investigation records are retained for five years after the close of the investigation. Excluded are records covered by the Prison Rape Elimination Act which are retained for 50 years after the close

of the investigation. This includes incident and investigative reports, evidence cards, photographs, interviews, and other related items.

Standard 115.403: Audit contents and findings

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.403 (f)

- The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or in the case of single facility agencies that there has never been a Final Audit Report issued.) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

- ☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)
- ☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

CDCR has submitted Governor Assurances and California is working to ensure that one third for their facilities are audited in the first year of the Second Cycle of PREA audits. The completed CDCR PREA Audit reports are located at the CDCR website at <http://www.cdcr.ca.gov/PREA/Reports-Audits.html>.

AUDITOR CERTIFICATION

I certify that:

- ☒ The contents of this report are accurate to the best of my knowledge.
- ☒ No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- ☒ I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

Administrative notes; this audit was delayed due to;

1. Pending confirmation of California Department of Corrections and Rehabilitation implementing a new P&Ps appropriately addressing the **115.41** PREA Screening Tools,
2. Confirmation, 30 days of compliance with new Screening tools.
3. NEW DOJ/PRC audit report formatting requirements that was implemented during the final report dates, requiring auditor to adjust and change over to the new report format.

The full 180-day corrective action period was utilized to achieve the necessary and agreed upon action to warrant a Meets Standard rating. The specific details related to the corrective action is in the narrative section and in the discussion of the relevant PREA Standards.

Charles E Owens Digital Signature

Feb 14, 2018

Auditor Signature

Date